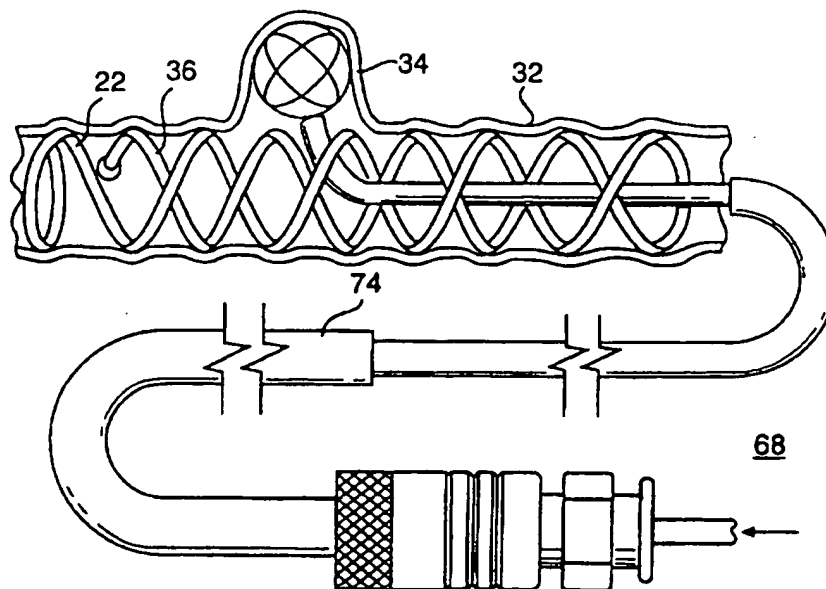




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(54) Title: IN SITU FORMABLE AND SELF-FORMING INTRAVASCULAR FLOW MODIFIER (IFM), CATHETER AND IFM ASSEMBLY, AND METHOD FOR DEPLOYMENT OF SAME



(57) Abstract

An intravascular flow modifier (IFM) for use in a vessel has an outer layer formed of a strand configured as a longitudinally oriented coil of adjacent helical loops extending between a first end and a second end of the outer layer. The outer layer is secured in the vessel by at least some of the helical loops pressing against a portion of the interior surface of the vessel. The IFM also has an inner layer formed of a strand configured as a longitudinally oriented coil of adjacent helical loops extending between a first end and a second end of the inner layer. At least a portion of the outer layer surrounds at least a portion of the inner layer so that at least some of the loops of the outer layer overlap and contact at least some of the loops of the inner layer. An assembly and method for deploying are also disclosed.

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INSITU FORMABLE AND SELF-FORMING INTRAVASCULAR
FLOW MODIFIER (IFM), CATHETER AND IFM ASSEMBLY,
AND METHOD FOR DEPLOYMENT OF SAME

BACKGROUND OF THE INVENTION

Field of the Invention

The present invention relates broadly to an insitu formable and self-forming intravascular flow modifier (IFM) and/or stent and the delivery and deployment of the IFM to a defect in a vessel. More particularly, the invention relates to an IFM that may be deployed in previously inaccessible vessels to current generation IFMs or stents due to the nearly linear pre-deployed configuration of the IFM and a method for controlling the final placement and deployed configuration of the IFM within a pre-selected segment of the vessel. The present invention is particularly suited but not limited to use as an intracranial IFM and method for deploying the IFM in a vessel.

Description of the Related Art

Most related art devices cannot be deployed in intracranial vessels. Even the devices having a pre-deployed configuration with a substantially reduced diameter compared to their respective deployed configuration are typically too large and too stiff to navigate the tight turn of the carotid artery and other small vessels of the body with torturous turns.

U.S. Patent 4,512,338 issued to Balko et al. discloses a process of deploying a memory metal coil across a defect in a vessel. The coil is elongated prior to deployment and warmed within the vessel to substantially revert back to its original coil form.

None of the related art, including Balko et al., discloses an IFM or a stent having the radial strength associated with multiple coils within one another with the capability of deploying the IFM or stent with a deployed configuration variably controlled by the relative movement of the strand forming the IFM or stent and a catheter through which the strand extends.

A need exists for an IFM, a catheter and IFM assembly, and a method for deploying the IFM which can provide a coil-in-coil IFM of various deployed configurations in previously inaccessible vessels according to the judgement of the physician at the time of deployment.

SUMMARY OF THE INVENTION

Accordingly, the present invention is directed to an IFM, a catheter and IFM assembly, and a method for deploying the IFM that overcomes the limitations and disadvantages of the related art.

An advantage of the present invention is its simple design that is nevertheless capable of providing an IFM that may be readily deployed in various configurations according to the specific vessel defect to alter the flow dynamics of the vessel, to keep an embolus deployed in a wide neck aneurysm in the aneurysm, or to support and strengthen the vessel.

Another advantage is that the IFM can access vessels through a unique catheter assembly and associated technique for delivering the IFM in a manner previously unavailable in the related art.

Additional features and advantages of the invention will be set forth in the description which follows, and in part will be apparent from the description, or may be learned by practice of the invention. The objects and other advantages of the invention will be realized and attained by the IFM, the catheter and IFM assembly, and the method for deploying the IFM particularly pointed out in the written description and claims hereof as well as the appended drawings.

To achieve these and other advantages in accordance with the purpose of the invention, as embodied and broadly described, the invention comprises an outer layer formed of a strand, which is configured as a longitudinally oriented coil of adjacent helical loops extending between a first end and a second end of the outer layer. The outer layer is secured in the vessel by at

least some of the helical loops pressing against a portion of the interior surface of the vessel. The invention also includes an inner layer formed of a strand, which is configured as a longitudinally oriented coil of adjacent helical loops extending between a first end and a second end of the inner layer. At least a portion of the outer layer surrounds at least a portion of the inner layer so that at least some of the loops of the outer layer overlap and contact at least some of the loops of the inner layer.

Preferably, the strand of the outer layer and the inner layer is a continuous strand, which is more preferably formed of or coated by a biocompatible material. Preferably, the strands of the outer and inner layers are formed of a high shape memory alloy, such as Nitinol alloy. The strand of the outer layer and the strand of the inner layer preferably have a circular, oval, rectangle, or triangular cross-section.

In one embodiment of the invention, the second end of the outer layer is anchored proximal to the first end of the inner layer. The second end of the outer layer preferably joins the first end of the inner layer. In another embodiment of the invention, the first end of the outer layer attaches to the second end of the inner layer so that the continuous strand forms a loop.

The first end of the outer layer and the second end of the inner layer may include means for inhibiting the wire strand from penetrating through the interior surface of the vessel, such as a loop on the ends. The first end of the outer layer and the second end of the inner layer are preferably distal ends relative to an insertion point into the vessel. The second end of the outer layer and the first end of the inner layer are preferably proximal ends relative to an insertion point into the vessel. Alternatively, the respective ends of the outer and inner layers may be reversed relative to the insertion point into the vessel depending upon the method used to deploy the IFM.

The preferred helical loops of the outer and inner layers are substantially circular. Both the helical loops of the outer and inner layers wind in a predetermined direction. Preferably, the rotation of the helical loops of the outer and inner layers is in the same direction but with the helical loops of the outer layer having a alpha helix and the helical loops of the inner layer having a beta helix. Of course, the outer layer may have the beta helix and the inner layer may have the alpha helix. Preferably, the number of helical loops of the outer layer is N , where N is at least two, and the number of the helical loops of the inner layer is M , where M is at least two.

In another embodiment of the invention, the outer layer is divided into at least a first end portion, a middle portion, and a second end portion along the longitudinally oriented coil. The first end, middle, and second end portions each have a pitch. The pitch of the middle portion may be smaller than the pitch of the first end and second end portions. Alternatively, the pitch of the middle portion may be larger than the pitch of the first end and second end portions. The pitch of the first and second end portions preferably provides a gap between the helical loops of between 3 and 7 mm (.118 and .276 inches), while the pitch of the middle portion preferably provides a gap between the helical loops of between 0.5 and 3 mm (.020 and .118 inches).

The diameter of the wire strand of the first end and second end portions of the outer layer may be smaller than the diameter of the wire strand of the middle portion. A preferred diameter of the wire strand of the outer layer is no greater than .020 inches.

A more preferred diameter of the wire strand of the outer layer is between .00025 and .006 inches. The diameter of the wire strand of the outer layer comprising the first end and second end portions is more preferably between .001 and .002 inches, and the diameter of the wire strand comprising the middle portion is more preferably between .003 and .004 inches.

As with the outer layer, the inner layer may be divided into at least a first end portion, a middle portion, and a second end portion along the longitudinally oriented coil. The pitch of the middle portion may be smaller than the pitch of the first end and second end portions. Alternatively, the pitch of the middle portion may be larger than the pitch of the first end and second end portions. The pitch of the first and second end portions preferably provides a gap between the helical loops of between 3 and 7 mm, while the pitch of the middle portion preferably provides a gap between the helical loops of between 0.5 and 3 mm.

The diameter of the wire strand of the first end and second end portions of the inner layer may be smaller than the diameter of the wire strand of the middle portion. A preferred diameter of the wire strand of the inner layer is no greater than .020 inches. A more preferred diameter of the wire strand of the inner layer is between .00025 and .006 inches. The diameter of the wire strand of the inner layer comprising the first end and second end portions is more preferably between .001 and .002 inches, and the diameter of the wire strand comprising the middle portion is more preferably between .003 and .004 inches. The helical loops of the inner layer preferably have a substantially constant inner diameter.

An alternative embodiment of the present invention may include a second inner layer formed of a strand, which is configured as a longitudinally oriented coil of adjacent helical loops extending between a first end and a second end of the second inner layer. At least a portion of the first inner layer surrounds at least a portion of the second inner layer so that at least some of the loops of the first inner layer overlap and contact at least some of the loops of the second inner layer.

The invention also comprises a continuous length of wire strand formed as a longitudinally oriented coil surrounding another longitudinally oriented coil. The coils form an outer layer of adjacent helical loops surrounding an inner layer of

adjacent helical loops. The outer layer urges against a portion of the interior surface of the vessel. The helical loops of the inner layer urge against the loops of the outer layer at crossing points.

Another embodiment of the invention for use in a cranial vessel comprises an outer layer formed of a strand having a first end, a second end opposite the first end, and a longitudinally oriented coil of adjacent helical loops between the first and second ends. The outer layer is secured in the cranial vessel by at least some of the helical loops pressing against a portion of the interior surface of the vessel. An inner layer formed of a strand of wire has a first end, a second end opposite the first end, and a longitudinally oriented coil of adjacent helical loops between the first and second ends. At least a portion of the outer layer surrounds at least a portion of the inner layer so that at least some of the loops of the outer layer overlap and contact at least some of the loops of the inner layer. The wire strand of the outer and inner layers is a continuous strand formed of a high shape memory alloy. The helical loops of the outer and inner layers are substantially circular. The second end of the outer layer joins the first end of the inner layer. The first end of the outer layer and second end of the inner layer have distal ends relative to an insertion point into the vessel. The second end of the outer layer and first end of the inner layer are proximal ends relative to an insertion point into the vessel. Additionally, the IFM has an outside diameter of between about 1.5 and 12 mm (.059 and .472 inches)

Yet another embodiment of the invention comprises at least one outer helical loop formed of a strand of wire. The outer loop is secured in the vessel by at least some portion of the helical loop pressing against a portion of the interior surface of the vessel. The invention also comprises at least one inner helical loop formed of a strand of wire. At least some portion of the outer helical loop surrounds at least a portion of the inner helical loop so that at least some of the outer helical

loop overlaps and contacts at least some of the inner helical loop.

Preferably, the outer helical loop overlaps and contacts the inner helical loop at a crossing point. More preferably, at least one crossing point is adjacent to the defect in the interior of the vessel.

The invention also includes an assembly for an intravascular repair of a defect of a body vessel. The assembly comprises an elongated first catheter and an IFM having a deployed configuration when in the vessel at a site of the defect and a pre-deployed configuration for movement through the first catheter. The IFM includes an outer layer and an inner layer as discussed above. The first catheter has a proximal end, a distal end, and a central lumen extending axially therethrough. The lumen has a size and shape complementary to the pre-deployed configuration of the IFM such that the IFM is axially slidable therethrough. A preferred first catheter has an outside diameter of between about .010 and about .014 inches and an inside diameter of between about .004 and about .006 inches.

The assembly may further include a second catheter having a distal end, a proximal end, and a central lumen extending axially therethrough. The lumen of the second catheter has a size and shape complementary to the first catheter such that the first catheter is axially slidable therein. At least a portion of the distal end of the first catheter can be inserted into the lumen of the second catheter at the proximal end and passes through the lumen of the second catheter and exits the second catheter at the distal end. A preferred second catheter has an outside diameter of approximately 1 mm (.03937 inches) and an inside diameter of at least approximately .022 inches.

The assembly preferably includes a third catheter having a distal end, a proximal end, and a central lumen extending axially therethrough. The lumen of the third catheter has a size and shape complementary to the second catheter such that the second catheter is axially slidable therein. At least a portion

of the distal end of the second catheter can be inserted into the lumen of the third catheter at the proximal end and passes through the lumen of the third catheter and exits the third catheter at the distal end.

Another embodiment of the assembly comprises an IFM having a deployed configuration when in the vessel at a site of the defect and a pre-deployed configuration for movement through the vessel towards the site of the defect as discussed above. The assembly also includes a means for moving and maintaining the IFM when in the pre-deployed configuration. The outer and inner layers of the IFM take the deployed configuration when the moving and maintaining means is no longer applied thereto. The moving and maintaining means preferably comprises an elongated first catheter having a size and shape complementary to the respective size and shape of the IFM when in the pre-deployed configuration so that the outer and inner layers are axially slidable therein.

Alternatively, the assembly may include means for disposing the IFM within the vessel. The disposing means preferably comprises an elongated first catheter as with the moving and maintaining means above, but also includes an elongated second catheter having a size and shape complementary to the first catheter such that the first catheter is axially slidable therein. At least a portion of the distal end of the first catheter can be inserted into the lumen of the second catheter at the proximal end and passes through the lumen of the second catheter and exits the second catheter at the distal end.

The assembly may further include means for selectively varying the gap between the adjacent helical loops of the outer and inner layers. The preferred selectively varying means includes an elongated first catheter and an elongated second catheter as just discussed, but also includes means for controlling axial movement of the IFM when in the pre-deployed configuration through the first catheter and out of the distal end of the first catheter. The controlling means preferably

includes means for controlling the axial movement of both the IFM and the first catheter.

Finally, the present invention also includes a method of forming an IFM having a first portion comprising an outer layer of strand and a second portion comprising an inner layer of strand at a pre-selected segment of a vessel. The method comprises the steps of moving the IFM through a catheter up to the pre-selected segment of the vessel; manipulating at least one of the outer layer of strand and the catheter to deploy the outer layer of strand in the pre-selected segment of vessel as a longitudinally oriented coil of adjacent helical loops; and manipulating at least one of the inner layer of strand and the catheter to deploy the inner layer of strand in the pre-selected segment of vessel as a longitudinally oriented coil of adjacent helical loops within the first portion of the IFM.

The step of moving preferably includes the step of insulating the IFM within the catheter. The method may also include the step of inserting the IFM into the catheter prior to the step of moving. Further, the method may include the step of elongating the IFM prior to inserting the IFM into the catheter. The step of elongating the IFM preferably includes the step of straightening the IFM to a substantially linear configuration.

The preferred catheter used in the step of moving has a size and shape complementary to the IFM when elongated such that the first and second portions of the IFM are axially slidable therethrough. The same catheter is preferred for used in the step of inserting and may be referred to as a micro-catheter. The step of inserting may further include the step of providing an elongated guide catheter having a size and shape complementary to the micro-catheter such that the micro-catheter is axially slidable therethrough. The guide catheter is preferably positioned in the vessel with the distal end of the guide catheter being oriented near the pre-selected segment of the vessel.

The method may further include the step of inserting at least a portion of the distal end of the micro-catheter into the lumen of the guide catheter at the proximal end and passing through the lumen of the guide catheter and exiting the guide catheter at the distal end prior to the step of moving the IFM.

The step of inserting preferably further comprises the step of providing an elongated angiographic catheter having a size and shape complementary to the guide catheter such that the guide catheter is axially slidable therethrough. The angiographic catheter is preferably positioned in the vessel with the distal end of the angiographic catheter oriented closer to an insertion point into the vessel than the distal end of the guide catheter. The method preferably includes the step of inserting at least a portion of the distal end of the guide catheter into the lumen of the angiographic catheter at the proximal end and passing through the lumen of the angiographic catheter and exiting the angiographic catheter at the distal end prior to the step of moving the IFM.

A method of practicing the method includes the step of inserting the angiographic catheter into the vessel before inserting the guide catheter containing and the micro-catheter into the vessel. The method preferably also includes the steps of halting the advancement of the angiographic catheter into the vessel and continuing to advance the guide catheter containing the micro-catheter into the vessel, and the steps of halting the advancement of the guide catheter into the vessel and continuing to advance the micro-catheter into the vessel.

In one embodiment of the method, the steps of manipulating include the steps of selectively varying the spacing between the adjacent helix loops of the outer and inner layers, respectively. The method may further include the step of expanding the IFM substantially to a pre-elongated diameter during the steps of manipulating. The step of expanding the IFM preferably includes the step of warming the wire strand of the outer layer and the wire strand of the inner layer. For strands

that are not formed of temperature responsive memory metals, the catheter within which the strand is moved mechanically constrains the strand from resuming its coiled diameter until released from the catheter. Regardless of the material used to form the strand, the catheter preferably has the structural characteristics to permit a user to pull the strand back into the catheter prior to final deployment.

The step of manipulating at least one of the outer layer and the catheter preferably includes the step of providing the outer layer with a number of loops where the number is at least two. Alternatively, the step of manipulating at least one of the outer layer and the catheter may include the step of providing the outer layer with a single loop. The step of manipulating at least one of the inner layer and the catheter preferably includes the step of providing the inner layer with a number of loops where the number is at least two. Alternatively, the step of manipulating at least one of the inner layer and the catheter may include the step of providing the inner layer with a single loop.

The step of manipulating first portion of the IFM includes the step of producing the outer layer with the portions, pitch, winding, and gap criteria from the IFM discussion above. The step of manipulating the outer layer or first portion of the IFM preferably includes the step of pushing the first portion out of the catheter and into the pre-selected segment. More preferably, the step of pushing includes pushing the first portion out of the distal end of the catheter while pulling the catheter towards the insertion point into the vessel. Alternatively, the step of pushing may include pushing the first portion out of the distal end of the catheter at a predetermined rate while pushing the catheter towards the pre-selected segment of the vessel at a rate slower than the predetermined rate of the first portion.

The step of manipulating the second portion of the IFM includes the step of producing the inner layer with portions, pitch, winding, and gap criteria from the IFM discussion above. The step of manipulating the inner layer or second portion of the IFM preferably includes the step of pushing the second portion out of the catheter and into the pre-selected segment. More preferably, the step of pushing includes pushing the second portion out of the distal end of the catheter at a predetermined rate while pushing the catheter towards the pre-selected segment of the vessel at a rate slower than the predetermined rate of the second portion. Alternatively, the step of pushing may include pushing the second portion out of the distal end of the catheter while pulling the catheter towards the insertion point into the vessel.

A preferred method of practicing the present invention includes the steps of straightening the IFM to a substantially linear configuration; providing an angiographic catheter, a guide catheter, and a micro-catheter, each of the catheters having a distal end, a proximal end, and a central lumen extending axially therethrough; inserting the angiographic catheter into the vessel; inserting the micro-catheter into the guide catheter, and the guide catheter into the angiographic catheter; inserting the IFM into the micro-catheter; positioning the distal end of the angiographic catheter at a predetermined location in the vessel proximal to the pre-selected segment of the vessel; advancing at least a portion of the distal end of the guide catheter through the angiographic catheter and exiting the angiographic catheter at the distal end; positioning the guide catheter in the vessel with the distal end of the guide catheter being oriented between the pre-selected segment of the vessel and the distal end of the angiographic catheter; advancing at least a portion of the distal end of the micro-catheter through the guide catheter and exiting the guide catheter at the distal end; moving the IFM through the micro-catheter up to the pre-selected segment of the vessel; manipulating at least one of the outer layer of strand and the

catheter to deploy the outer layer of strand in the pre-selected segment of vessel as a longitudinally oriented coil of adjacent helical loops; and manipulating at least one of the inner layer of strand and the catheter to deploy the inner layer of strand in the pre-selected segment of vessel as a longitudinally oriented coil of adjacent helical loops within the first portion of the IFM.

Another method of practicing the present invention includes the steps of straightening the IFM to a substantially linear configuration; providing a guide catheter and a micro-catheter, each of the catheters having a distal end, a proximal end, and a central lumen extending axially therethrough; inserting the micro-catheter into the guide catheter; inserting the guide catheter into the vessel; inserting the IFM into the micro-catheter; positioning the guide catheter in the vessel with the distal end of the guide catheter being oriented between the pre-selected segment of the vessel and an insertion point into the vessel; advancing at least a portion of the distal end of the micro-catheter through the guide catheter and exiting the guide catheter at the distal end; moving the IFM through the micro-catheter up to the pre-selected segment of the vessel; and manipulating the layer of strand and the catheter to deploy the layer of strand in the pre-selected segment of vessel as a longitudinally oriented coil of adjacent helical loops.

It is to be understood that both the foregoing general description and the following detailed descriptions are exemplary only, and are not restrictive of the invention.

BRIEF DESCRIPTION OF THE DRAWINGS

The accompanying drawings are included to provide a further understanding of the invention and are incorporated in and constitute a part of the specification. The drawings illustrate several embodiments of the invention and together with the description, serve to explain the principals of the invention. In the drawings,

Fig. 1 is a perspective view of an IFM deployed in a cutaway of a vessel according to one embodiment;

Fig. 2 is a perspective view of an IFM deployed in a cutaway of a vessel according to another embodiment;

Fig. 3 is a perspective view of an IFM deployed in a cutaway of a vessel according to yet another embodiment;

Fig. 4A is a perspective view of the outer layer of an IFM deployed in a cutaway of a vessel according to one embodiment;

Fig. 4B is a perspective view of the outer layer of an IFM deployed in a cutaway of a vessel according to another embodiment of the invention;

Fig. 5 is a perspective view of the outer layer of an IFM deployed in a cutaway of a vessel according to yet another embodiment;

Fig. 6A is a perspective view of the inner layer of an IFM deployed in a cutaway of a vessel according to one embodiment;

Fig. 6B is a perspective view of the inner layer of an IFM deployed in a cutaway of a vessel according to another embodiment of the invention;

Fig. 7 is a perspective view of the inner layer of an IFM deployed in a cutaway of a vessel according to yet another embodiment;

Fig. 8 is a perspective view of an IFM deployed in a cutaway of a vessel according to another embodiment;

Fig. 9 is a side view of the assembly beginning deployment of a perspective view of the outer layer of an IFM in a cutaway of a vessel according to one embodiment;

Fig. 10 is a side view of the assembly completing deployment of a perspective view of the outer layer of an IFM in a cutaway of a vessel according to the embodiment of Fig. 9;

Fig. 11 is a side view of the assembly completing deployment of a perspective view of the inner layer of an IFM in a cutaway of a vessel according to the embodiment of Fig. 9;

Fig. 12 is a side view of the assembly deploying a perspective view of a thrombogenic device in a cutaway of a vessel having a defect according to the embodiment of Fig. 9;

Fig. 13 is a side view of the assembly beginning deployment of a perspective view of the outer layer of an IFM in a cutaway of a vessel according to another embodiment;

Fig. 14 is a side view of the assembly completing deployment of a perspective view of the outer layer of an IFM in a cutaway of a vessel according to the embodiment of Fig. 13; and

Fig. 15 is a side view of the assembly completing deployment of a perspective view of the inner layer of an IFM in a cutaway of a vessel according to the embodiment of Fig. 13.

A DESCRIPTION OF THE PREFERRED EMBODIMENTS

Reference will now be made in detail to the present preferred embodiments of the invention, examples of which are illustrated in the accompanying drawings.

An intravascular flow modifier (IFM) for use in a vessel according to the present invention comprises an outer layer formed of a strand. The strand is configured as a longitudinally oriented coil of adjacent helical loops extending between a first end and a second end of the outer layer.

An exemplary embodiment of the IFM of the present invention is shown deployed in a vessel in Fig. 1 and designated generally by reference numeral 20. The shaded segment of IFM is on the inside of the loop and in this embodiment the outer layer has a beta helix and the inner layer has an alpha helix.

As broadly embodied herein, and referring to Fig. 1, an IFM 20 has an outer layer 22 formed of a strand. The strand is configured as a longitudinally oriented coil 24 of adjacent helical loops 26 extending between a first end 28 and a second end 30 of the outer layer 22. The outer layer 22 is secured in the vessel 32 by at least some of the helical loops 26 pressing against a portion of the interior surface of the vessel 32. The IFM 20 is typically deployed to alter flow dynamics and/or to keep an embolus deployed in a wide neck aneurysm in the aneurysm.

The IFM 20 may also perform as a typically stent deployed to reinforce or strengthen a weakened or otherwise defective vessel. The vessel 32 is depicted with a defect 34, which is a wide neck aneurysm. While the IFM of the present invention is shown in use in the attached figures spanning an aneurysm, it is contemplated and within the scope of the claimed invention to deploy the IFM in any vessel of the body without regard to any particular defect.

The IFM 20 of the invention also includes an inner layer 36 formed of a strand. The strand is configured as a longitudinally oriented coil 38 of adjacent helical loops 40 extending between a first end 42 and a second end 44 of the inner layer 36. At least a portion of the outer layer 22 surrounds at least a portion of the inner layer 36 so that at least some of the loops 26 of the outer layer 22 overlap and contact at least some of the loops 40 of the inner layer 36. The helical loops 40 of the inner layer 36 preferably urge against the loops 26 of the outer layer 22 at crossing points.

As broadly embodied in Fig. 2, the preferred strand of the outer layer 22 and the inner layer 36 is a continuous strand, which is more preferably formed of or coated by a biocompatible material. Preferably, the strands of the outer and inner layers 22, 36 are formed of a high shape memory alloy, such as Nitinol alloy. An alloy such as Nitinol is plastically deformable at one temperature and can completely recover to their original shape on being raised to a higher temperature. Nickel-titanium alloys commonly referred to as nitinol are well known to those skilled in the art. The strand of the outer layer 22 and the strand of the inner layer 36 preferably have a circular, oval, rectangle, or triangular cross-section.

Use of the term "wire" within this application is not intended to limit the claimed invention to metal thread or the like. While metal is a preferred material, it is also contemplated that plastics, ceramics, glasses, and various compositions of materials could work within the scope of the

claimed invention. Further, the term "strand" is not intended to limit the claimed invention to fibers or filaments twisted together to form a rope or braided line. While filaments could be braided together to provide the strand of the claimed invention, the term "strand" is used herein to define multiple filaments working together whether braided together or not, as well as to define a single filament or line of material.

The preferred strand is a single line filament. The particular strand may be selected based on the strength, the memory, and the diameter needed for the IFM. The diameter of the strand is also a factor when the strand may pass over a perforating vessel that should not be blocked. In this case, the diameter is preferably small enough that even if a crossing point between the outer and inner layers is over a perforating vessel, complete blockage does not occur.

In the embodiment of the IFM 20 shown in Fig. 1, the second end 30 of the outer layer 22 is anchored proximal to the first end 42 of the inner layer 36. As shown in the embodiment of Fig. 2, the second end 30 of the outer layer 22 preferably joins the first end 42 of the inner layer 36. In another embodiment of the IFM, and referring to Fig. 3, the first end 28 of the outer layer 22 attaches to the second end 44 of the inner layer 36 so that the continuous strand forms a loop. In the embodiment depicted in Fig. 3, the outer and inner layers 22, 36 are simultaneously deployed as the loop is released from the catheter.

As shown in the embodiment of Fig. 1, the first end 28 of the outer layer 22 may include means for inhibiting the wire strand from penetrating through the interior surface of the vessel 32, such as a loop 46 provided on the first end 28 of the wire strand. The second end 44 of the inner layer 36 may include means for inhibiting the wire strand from penetrating through the interior surface of the vessel 32, such as a loop 48 on the second end 44 of the wire strand. Loops may be added to any exposed ends of the IFM 20. The first end 28 of the outer layer

22 and the second end 44 of the inner layer 36 are preferably distal ends relative to an insertion point into the vessel 32. The second end 30 of the outer layer 22 and the first end 42 of the inner layer 36 are preferably proximal ends relative to an insertion point into the vessel 32. Alternatively, the respective ends of the outer and inner layers 22, 36 may be reversed relative to the insertion point into the vessel 32 depending upon the method used to deploy the IFM.

The preferred helical loops 26, 40 of the outer and inner layers 22, 36 respectively are substantially circular. Both the helical loops 26, 40 of the outer and inner layers 22, 36 respectively wind in a predetermined direction. Preferably, the rotation of the helical loops 26, 40 of the outer and inner layers 22, 36 is in the same direction but with the helical loops 26 of the outer layer 22 having a alpha helix and the helical loops 40 of the inner layer 36 having a beta helix. Of course, the outer layer 22 may have the beta helix and the inner layer 36 may have the alpha helix. Preferably, the number of helical loops 26 of the outer layer 22 is N, where N is at least two, and the number of the helical loops 40 of the inner layer 36 is M, where M is at least two.

In another embodiment of the invention broadly depicted in Fig. 4A, the outer layer 22 is divided into at least a first end portion 50, a middle portion 52, and a second end portion 54 along the longitudinally oriented coil 24. The pitch of the middle portion 52 may be smaller than the pitch of the first end and second end portions 50, 54. Alternatively, as shown in Fig. 4B, the pitch of the middle portion 52 may be larger than the pitch of the first end and second end portions 50, 52. The pitch of the first and second end portions 50, 54 preferably provides a gap between the helical loops of between 3 and 7 mm, while the pitch of the middle portion 52 provides a gap between the helical loops 26 of between 0.5 and 3 mm.

As shown in Fig. 5, the diameter of the wire strand of the first end and second end portions 50, 54 of the outer layer

22 may be smaller than the diameter of the wire strand of the middle portion 52. A preferred diameter of the wire strand of the outer layer 22 is no greater than .020 inches. A more preferred diameter of the wire strand of the outer layer 22 is between .00025 and .006 inches. The diameter of the wire strand of the outer layer 22 comprising the first end and second end portions 50, 54 is more preferably between .001 and .002 inches, and the diameter of the wire strand comprising the middle portion 52 is more preferably between .003 and .004 inches.

As with the outer layer 22, and as shown in Fig. 6A, the inner layer 36 may be divided into at least a first end portion 56, a middle portion 58, and a second end portion 60 along the longitudinally oriented coil 38. The pitch of the middle portion 58 may be smaller than the pitch of the first end and second end portions 56, 60. Alternatively, and referring to Fig. 6B, the pitch of the middle portion 58 may be larger than the pitch of the first end and second end portions 56, 60. The pitch of the first and second end portions 56, 60 preferably provides a gap between the helical loops 40 of between 3 and 7 mm, while the pitch of the middle portion 58 provides a gap between the helical loops 40 of between 0.5 and 3 mm.

As shown in Fig. 7, the diameter of the wire strand of the first end and second end portions 56, 60 of the inner layer 36 may be smaller than the diameter of the wire strand of the middle portion 58. A preferred diameter of the wire strand of the inner layer 36 is no greater than .020 inches. A more preferred diameter of the wire strand of the inner layer 36 is between .00025 and .006 inches. The diameter of the wire strand of the inner layer 36 comprising the first end and second end portions 56, 60 is more preferably between .001 and .002 inches, and the diameter of the wire strand comprising the middle portion 58 is more preferably between .003 and .004 inches. The helical loops 40 of the inner layer 36 preferably have a substantially constant inner diameter.

A preferred use for IFM 20 of the present invention is for bridging a defect in a cranial vessel. For intracranial use the wire strand of the outer and inner layers 22, 36 is preferably a continuous strand to minimize the number of exposed ends and potential of puncturing the vessel. The strand is preferably formed of a high shape memory alloy to readily permit the IFM 20 to be straightened, or at least have its coiled diameter reduced for insertion into the vessel, and then have it assume its deployed configuration when released from the delivering catheter. The preferred helical loops 26, 40 of the outer and inner layers 22, 36 are substantially circular. Additionally, the IFM 20 has an outside diameter, which is preferably between about 1.5 and 12 mm.

Yet another embodiment of the invention is broadly depicted in Fig. 8. The IFM 20 has at least one outer helical loop 62 formed of a strand of wire. The outer helical loop 62 is secured in the vessel 32 by at least some portion of the helical loop 62 pressing against a portion of the interior surface of the vessel 32. The IFM 20 also has at least one inner helical loop 64 formed of a strand of wire. At least some portion of the outer helical loop 62 surrounds at least a portion of the inner helical loop 64 so that at least some of the outer helical loop 62 overlaps and contacts at least some of the inner helical loop 64. Preferably, the outer helical loop 62 overlaps and contacts the inner helical loop 64 at a crossing point 66. More preferably, at least one crossing point 66 is adjacent to the defect 34 in the interior of the vessel 32. The IFM 20 of this embodiment may have an arched figure eight structure, and preferably has the crossing point 66 near the defect 34 of the vessel 32.

The invention also includes an assembly for an intravascular repair of a defect of a body vessel.

An exemplary embodiment of the assembly of the present invention is shown in Figs. 9-12 and designated generally by the reference numeral 68.

As broadly embodied herein, and referring to Figs. 9-12, an assembly 68 has an elongated first catheter 70 and an IFM 20 having a deployed configuration when in the vessel 32 at a site of the defect 34 and a pre-deployed configuration for movement through the first catheter 70. The IFM 20 includes an outer layer 22 and an inner layer 36 as discussed above. The first catheter 70 has a proximal end, a distal end, and a central lumen extending axially therethrough. The lumen has a size and shape complementary to the pre-deployed configuration of the IFM 20 such that the IFM 20 is axially slidable therethrough. A preferred first catheter 70 has an outside diameter of between about .010 and about .014 inches and an inside diameter of between about .004 and about .006 inches. The small diameter of the catheter permits access to vessels of the body previously not available for IFM deployment.

The assembly also includes a second catheter 72 having a distal end, a proximal end, and a central lumen extending axially therethrough. The lumen of the second catheter has a size and shape complementary to the first catheter 70 such that the first catheter 70 is axially slidable therein. At least a portion of the distal end of the first catheter 70 can be inserted into the lumen of the second catheter 72 at the proximal end and passes through the lumen of the second catheter 72 and exits the second catheter 72 at the distal end. A preferred second catheter 72 has an outside diameter of approximately 1 mm and an inside diameter of at least approximately .022 inches. The small diameter of the second catheter permits access to vessels of the body previously not available for IFM deployment utilizing a catheter-in-catheter assembly.

The assembly further has a third catheter 74 having a distal end, a proximal end, and a central lumen extending axially therethrough. The lumen of the third catheter 74 has a size and shape complementary to the second catheter 72 such that the second catheter 72 is axially slidable therein. At least a portion of the distal end of the second catheter 72 can be

inserted into the lumen of the third catheter 74 at the proximal end and passes through the lumen of the third catheter 74 and exits the third catheter 74 at the distal end.

Finally, and referring to Figs. 9-12, the present invention also includes a method of forming an IFM 20 at a pre-selected segment of a vessel 32. The method comprises the steps of moving the IFM 20 through a catheter 70 up to the pre-selected segment of the vessel 32; manipulating at least one of the outer layer 22 of wire strand and the catheter to deploy the outer layer 22 of strand in the pre-selected segment of vessel 32 as a longitudinally oriented coil 24 of adjacent helical loops 26; and manipulating at least one of the inner layer 36 of wire strand and the catheter 70 to deploy the inner layer of strand in the pre-selected segment of vessel as a longitudinally oriented coil 38 of adjacent helical loops 40 within the first portion of the IFM 20.

The step of moving preferably includes the step of insulating the IFM 20 within the catheter 70. When Nitinol metal or any other temperature reactive memory materials are used for the IFM 20, a user has reduced the IFM 20 diameter under conditions that cause the IFM 20 to expand towards its initial diameter when reaching a predetermined temperature. For example, an IFM could be formed as a coil, then straightened into a wire strand, then upon reaching a predetermined temperature in the body of a patient become a coil again. To keep the IFM from transforming into a coil before being placed in a pre-selected segment of a vessel, the IFM can be insulated from the body by the catheter either alone or in conjunction with cooling fluids and gases. Of course, the IFM could be formed of memory metal that does not transform at normal body temperatures or at any temperature.

Additionally, while memory metals are one preferred embodiment of the claimed invention, other IFM materials may be used in combination with an IFM delivery system that mechanically restrains the IFM in a reduced diameter pre-deployed

configuration. A single catheter may have the structural properties to restrain a coiled IFM that has been elongated into a pre-deployed configuration. Further, the assemblies described herein can utilize the catheter-in-catheter arrangement to provide additional structural rigidity for mechanically restraining an IFM.

The method may also include the step of inserting the IFM 20 into the catheter 70 prior to the step of moving. Further, the method may include the step of elongating the IFM 20 prior to inserting the IFM 20 into the catheter 70. The step of elongating the IFM 20 preferably includes the step of straightening the IFM 20 to a substantially linear configuration.

The preferred catheter 70 may be referred to as a micro-catheter due to its relative size in the preferred use for deploying an intracranial IFM. While the relative sizes of the catheters are given in view of a preferred use for deploying an intracranial IFM, it is contemplated within the scope of the claimed invention that the assembly and method will be used in all vessels of the body.

The step of inserting may further include the step of providing an elongated guide catheter 72 having a size and shape complementary to the micro-catheter 70 such that the micro-catheter 70 is axially slidable therethrough. The guide catheter 72 is preferably positioned in the vessel 32 with the distal end of the guide catheter 72 being oriented near the pre-selected segment of the vessel 32. The method may further include the step of inserting at least a portion of the distal end of the micro-catheter 70 into the lumen of the guide catheter 72 at the proximal end and passing through the lumen of the guide catheter 72 and exiting the guide catheter 72 at the distal end prior to the step of moving the IFM.

The step of inserting preferably further comprises the step of providing an elongated angiographic catheter 74 having a size and shape complementary to the guide catheter 72 such that the guide catheter 72 is axially slidable therethrough. The

angiographic catheter 74 is preferably positioned in the vessel 32 with the distal end of the angiographic catheter 74 oriented closer to an insertion point into the vessel 32 than the distal end of the guide catheter 72. The method preferably includes the step of inserting at least a portion of the distal end of the guide catheter 72 into the lumen of the angiographic catheter 74 at the proximal end. The guide catheter 72 passes through the lumen of the angiographic catheter 74 and exits the angiographic catheter 74 at the distal end prior to the step of moving the IFM 20.

A preferred method of practicing the invention includes the step of inserting the angiographic catheter 74 into the vessel 32 before inserting the guide catheter 72 containing the micro-catheter 70 into the vessel 32. The method preferably also includes the steps of halting the advancement of the angiographic catheter 74 into the vessel 32 and continuing to advance the guide catheter 72 and the micro-catheter 70 into the vessel 32. For deployment of an intracranial IFM, the angiographic catheter 74 is halted on the proximal side of the carotid artery. The angiographic catheter 74 is well known in the art and is only unique in its combination with the other elements of the assembly and method disclosed herein. Additionally, other known devices and methods, such as the use of guide wires in conjunction with catheters may be used with the disclosed assembly and method.

The method preferably also includes the steps of halting the advancement of the guide catheter 72 into the vessel 32 and continuing to advance the micro-catheter 70 into the vessel 32. For deployment of an intracranial IFM, the guide catheter 72 is preferably halted on the proximal side of the defect. The guide catheter 72 has a structural that permits it to navigate the carotid artery and other tiny vessels having tight turns.

In one embodiment of the method invention, the steps of manipulating include the steps of selectively varying the spacing between the adjacent helix loops 26, 40 of the outer and inner layers, 22, 36 respectively. For an intracranial IFM, the option

of varying the spacing or controlling the pitch at various points along the longitudinal coil is especially important. The physician can manipulate the relative movement of the IFM and micro-catheter 70 to stretch the coil out or bunch it up to avoid blocking perforating arteries. For example, if the deployed IFM blocks off a perforating artery, the brain tissue fed by the blocked artery will be starved of blood resulting in the death of surrounding brain cells. Further, the physician can tighten the coil by reducing the pitch to more fully obstruct the blood flow into the aneurysm.

The method may further include the step of expanding the IFM 20 substantially to a pre-elongated diameter during the steps of manipulating. The step of expanding the IFM 20 may include the step of warming the wire strand of the outer layer 22 and the wire strand of the inner layer 36.

The step of manipulating at least one of the outer layer 22 and the catheter preferably includes the step of providing the outer layer 22 with a number of loops where the number is at least two. Alternatively, the step of manipulating at least one of the outer layer 22 and the catheter may include the step of providing the outer layer 22 with a single loop. The step of manipulating at least one of the inner layer 36 and the catheter preferably includes the step of providing the inner layer 36 with a number of loops where the number is at least two. Alternatively, the step of manipulating at least one of the inner layer 36 and the catheter 70 may include the step of providing the inner layer 36 with a single loop. In the embodiment including a single loop for the outer and inner layer 22, 36, the loops of the outer and inner layer 22, 36 may have their respective ends joined to one another in the configuration of a twisted loop, such as in a figure-eight design.

The step of manipulating the first portion of the IFM 20 includes the step of feeding the outer layer 22 out of the catheter 70 to produce the portions, pitch, winding, and gap criteria from the IFM discussion above according to the

physicians desires. The step of manipulating the outer layer 22 or first portion of the IFM preferably includes the step of pushing the first portion out of the catheter 70 and into the pre-selected segment. More preferably, the step of pushing includes pushing the first portion out of the distal end of the catheter 70 while pulling the proximal end of the catheter 70 towards the insertion point into the vessel 32. The relative movement between the strand and the catheter 70 allows the physician to deploy an IFM specifically suited for repair of the defect in the vessel.

The step of deploying the second portion of the IFM 20 includes the step of producing the inner layer 36 with portions, pitch, winding, and gap criteria from the IFM discussion above. The step of manipulating the inner layer 36 or second portion of the IFM 20 preferably includes the step of pushing the second portion out of the catheter 70 and into the pre-selected segment.

More preferably, the step of pushing includes pushing the second portion out of the distal end of the catheter 70 at a predetermined rate while pushing the distal end of the catheter 70 towards the pre-selected segment of the vessel 32 at a rate slower than the predetermined rate of the second portion.

Once the physician has completed weaving the second portion of the IFM within the first portion of the IFM, the strand may be cut in a number of ways. By way of example, and referring to Fig. 11, a ball 76 and claw 78 are depicted cutting the strand. Alternatively, the strand may be cut by a controlled electric discharge from the catheter 70 to a reduced diameter portion of the strand. A preferred method uses a strand of a pre-selected length, thereby eliminating any need for a cutting step. Other devices and methods for cutting a strand of an IFM are known to those skilled in the art and may be readily adapted to the present invention.

A preferred method of practicing the present invention includes the steps of straightening the IFM 20 to a substantially linear configuration; inserting the angiographic catheter 74 into

the vessel 32; inserting the micro-catheter 70 into the guide catheter 72, and the guide catheter 72 into the angiographic catheter 74; inserting the IFM 20 into the micro-catheter; positioning the distal end of the angiographic catheter 74 at a predetermined location in the vessel 32 proximal to the pre-selected segment of the vessel 32; advancing at least a portion of the distal end of the guide catheter 72 through the angiographic catheter 74 and exiting the angiographic catheter 74 at the distal end; positioning the guide catheter 72 in the vessel 32 with the distal end of the guide catheter 72 being oriented between the pre-selected segment of the vessel 32 and the distal end of the angiographic catheter 74; advancing at least a portion of the distal end of the micro-catheter 70 through the guide catheter 72 and exiting the guide catheter 72 at the distal end; moving the IFM 20 through the micro-catheter 70 up to the pre-selected segment of the vessel 32; manipulating at least one of the outer layer 22 of wire strand and the catheter 70 to deploy the outer layer 22 of strand in the pre-selected segment of vessel 32 as a longitudinally oriented coil 24 of adjacent helical loops 26; and manipulating at least one of the inner layer 36 of wire strand and the catheter 70 to deploy the inner layer 36 of strand in the pre-selected segment of vessel 32 as a longitudinally oriented coil 38 of adjacent helical loops 40.

Another embodiment of a method of forming an IFM 20 at a pre-selected segment of a vessel 32 is illustrated in Figs. 13-15. This embodiment is similar to the embodiment discussed above except that the step of pushing the first portion includes pushing the first portion out of the distal end of the catheter 70 at a predetermined rate while pushing the catheter 70 towards the pre-selected segment of the vessel 32 at a rate slower than the predetermined rate of the first portion as shown in Figs. 13 and 14, and the step of pushing the second portion includes pushing the second portion out of the distal end of the catheter 70 while pulling the catheter 70 towards the insertion point into

the vessel 32. This embodiment of the method has the advantage of having catheter 70 already positioned on the distal side of the IFM upon completing the outer layer 22. Therefore, the catheter 70 need only be pulled toward the insertion point as strand is pushed out to form the inner layer 36. Thus, the catheter 70 cannot be pushed into the outer layer 22 during the step of manipulating to deploy the inner layer 36.

While the above method and techniques have been disclosed in connection with the preferred IFM having an outer layer and an inner layer, it is contemplated and within the scope of the claimed method that an IFM and/or stent having a single layer or coil may be deployed according to the claimed method. The method permits one to manipulate and control the final configuration of the IFM during deployment.

While there has been illustrated and described what is at present considered to be a preferred embodiment of the present invention, it will be understood by those skilled in the art that various changes and modifications may be made, and equivalents may be substituted for elements thereof, without departing from the true scope of the invention. Therefore, it is intended that this invention not be limited to the particular embodiments disclosed herein, but that the invention include all embodiments falling within the scope of the appended claims.

WHAT IS CLAIMED IS:

1. An intravascular flow modifier (IFM) for use in a vessel, the vessel having an interior surface, the IFM comprising:

an outer layer formed of a strand, said strand being configured as a longitudinally oriented coil of adjacent helical loops extending between a first end and a second end of said outer layer, said outer layer being secured in the vessel by at least some of said helical loops pressing against a portion of the interior surface of the vessel; and

an inner layer formed of a strand, said strand being configured as a longitudinally oriented coil of adjacent helical loops extending between a first end and a second end of said inner layer, at least a portion of said outer layer surrounding at least a portion of said inner layer so that at least some of said loops of said outer layer overlap and contact at least some of said loops of said inner layer.

2. The IFM of claim 1, wherein said strand of said outer layer and said inner layer is a continuous strand.

3. The IFM of claim 2, wherein said continuous strand is made of a biocompatible material.

4. The IFM of claim 1, wherein said strands of said outer and inner layers comprises a high shape memory alloy.

5. The IFM of claim 4, wherein said strands are made of a Nitinol alloy.

6. The IFM of claim 1, wherein said strand of said outer and inner layers have a cross-section, the cross-section being one of circular, oval, rectangle, and triangular.

7. The IFM of claim 1, wherein said second end of said outer layer is anchored proximal to said first end of said inner layer.

8. The IFM of claim 2, wherein said first end of said outer layer is attached to said second end of said inner layer such that said continuous strand forms a loop.

9. The IFM of claim 1, wherein said second end of said outer layer is joined to said first end of said inner layer.

10. The IFM of claim 1, wherein said first end of said outer layer includes means for inhibiting said strand from penetrating through the interior surface of the vessel.
11. The IFM of claim 10, wherein said inhibiting means includes a loop on said first end of said strand.
12. The IFM of claim 1, wherein said second end of said inner layer includes means for inhibiting said strand from penetrating through the interior surface of the vessel.
13. The IFM of claim 12, wherein said inhibiting means includes a loop on said second end of said strand.
14. The IFM of claim 1, wherein said first end of said outer layer and said second end of said inner layer are distal ends relative to an insertion point into the vessel.
15. The IFM of claim 1, wherein said second end of said outer layer and said first end of said inner layer are proximal ends relative to an insertion point into the vessel.
16. The IFM of claim 1, wherein said helical loops of said outer and inner layers are substantially circular.
17. The IFM of claim 1, wherein both said helical loops of said outer and inner layers wind in a predetermined direction.
18. The IFM of claim 1, wherein the number of said helical loops of said outer layer is N, where N is at least two.
19. The IFM of claim 1, wherein the number of said helical loops of said inner layer is M, where M is at least two.
20. The IFM of claim 1, wherein said outer layer is divided into at least a first end portion, a middle portion, and a second end portion along said longitudinally oriented coil, said first end, middle, and second end portions each having a pitch, the pitch of said middle portion being smaller than the pitch of said first end and second end portions.
21. The IFM of claim 20, wherein the pitch of said first end portion provides a gap between said helical loops of between 3 and 7 mm, the pitch of said middle portion provides a gap between said helical loops of between 0.5 and 3 mm, and the pitch of said

second end portion provides a gap between said helical loops of between 3 and 7 mm.

22. The IFM of claim 20, wherein said strand of said outer layer has a diameter, the diameter of said strand of said first end and second end portions is smaller than the diameter of said strand of said middle portion.

23. The IFM of claim 22, wherein the diameter of said strand of said outer layer is no greater than .020 inches.

24. The IFM of claim 23, wherein the diameter of said strand of said outer layer comprising said first end and second end portions is between .001 and .002 inches, and the diameter of said strand comprising said middle portion is between .003 and .004 inches.

25. The IFM of claim 1, wherein said outer layer is divided into a first end portion, a middle portion, and a second end portion along said longitudinally oriented coil, said first end, middle, and second end portions each having a pitch, the pitch of said middle portion being larger than the pitch of said first end and second end portions.

26. The IFM of claim 1, wherein said inner layer is divided into at least a first end portion, a middle portion, and a second end portion along said longitudinally oriented coil, said first end, middle, and second end portions each having a pitch, the pitch of said middle portion being smaller than the pitch of said first end and second end portions.

27. The IFM of claim 26, wherein the pitch of said first end portion provides a gap between said helical loops of between 3 and 7 mm, the pitch of said middle portion provides a gap between said helical loops of between 0.5 and 3 mm, and the pitch of said second end portion provides a gap between said helical loops of between 3 and 7 mm.

28. The IFM of claim 26, wherein said strand of said inner layer has a diameter, the diameter of said strand of said first end and second end portions is smaller than the diameter of said strand of said middle portion.

29. The IFM of claim 28, wherein the diameter of said strand of said inner layer is no greater than .020 inches.

30. The IFM of claim 29, wherein the diameter of said strand of said inner layer comprising said first end and second end portions is between .001 and .002 inches, and the diameter of said strand comprising said middle portion is between .003 and .004 inches.

31. The IFM of claim 26, wherein said helical loops of said inner layer have a substantially constant inner diameter.

32. The IFM of claim 1, wherein said inner layer is divided into a first end portion, a middle portion, and a second end portion along said longitudinally oriented coil, said first end, middle, and second end portions each having a pitch, said pitch of said middle portion being larger than the pitch of said first end and second end portions.

33. The IFM of claim 1, further including a second inner layer formed of a strand, said strand being configured as a longitudinally oriented coil of adjacent helical loops extending between a first end and a second end of said second inner layer, at least a portion of said inner layer surrounding at least a portion of said second inner layer so that at least some of said loops of said inner layer overlap and contact at least some of said loops of the second inner layer.

34. An intravascular flow modifier (IFM) for use in a vessel, the vessel having an interior surface, the IFM comprising:

a continuous length of strand formed as a longitudinally oriented coil surrounding another longitudinally oriented coil, said coils forming an outer layer of adjacent helical loops surrounding an inner layer of adjacent helical loops, said outer layer urging against a portion of the interior surface of the vessel, said helical loops of said inner layer urging against said loops of said outer layer at crossing points.

35. An intravascular flow modifier (IFM) for use in a vessel, the vessel having an interior surface, the IFM comprising:

an outer layer formed of a strand having a first end, a second end opposite said first end, and a longitudinally oriented coil of adjacent helical loops between said first and second ends, said outer layer being secured in the vessel by at least some of said helical loops pressing against a portion of the interior surface of the vessel; and

an inner layer formed of a strand having a first end, a second end opposite said first end, and a longitudinally oriented coil of adjacent loops between said first and second ends, at least a portion of said outer layer surrounding at least a portion of said inner layer so that at least some of said loops of said outer layer overlap and contact at least some of said loops of said inner layer,

said strand of said outer and inner layers being a continuous strand formed of a high shape memory alloy and having a cross-section, the cross-section being one of circular, oval, rectangle, and triangular, said helical loops of said outer and inner layers being substantially circular, said second end of said outer layer joining said first end of said inner layer, said first end of said outer layer and said second end of said inner layer being distal ends relative to an insertion point into the vessel, said second end of said outer layer and said first end of said inner layer being proximal ends relative to an insertion point into the vessel, said helical loops of said outer and inner layers wind in a predetermined direction.

36. An intracranial intravascular flow modifier (IFM) for use in a cranial vessel, the vessel having an interior surface, the IFM comprising:

an outer layer formed of a strand having a first end, a second end opposite said first end, and a longitudinally oriented coil of adjacent helical loops between said first and second ends, said outer layer being secured in the vessel by at least some of said helical loops pressing against a portion of the interior surface of the vessel; and

an inner layer formed of a strand having a first end, a second end opposite said first end, and a longitudinally oriented coil of adjacent helical loops between said first and second ends, at least a portion of said outer layer surrounding at least a portion of said inner layer so that at least some of said loops of said outer layer overlap and contact at least some of said loops of said inner layer,

said strand of said outer and inner layers being a continuous strand formed of a high shape memory alloy, said helical loops of said outer and inner layers being substantially circular, said second end of said outer layer joining said first end of said inner layer, said first end of said outer layer and second end of said inner layer being distal ends relative to an insertion point into the vessel, said second end of said outer layer and first end of said inner layer being proximal ends relative to an insertion point into the vessel, said IFM having an outside diameter of between about 1.5 and 12 mm.

37. The IFM of claim 36, wherein said outer layer is divided into a first end portion, a middle portion, and a second end portion along said longitudinally oriented coil, said first end, middle, and second end portions each having a pitch, the pitch of said middle portion being smaller than the pitch of said first end and second end portions, and said inner layer is divided into a first end portion, a middle portion, and a second end portion along the longitudinally oriented coil, said first end, middle, and second end portions each having a pitch, the pitch of said middle portion being smaller than the pitch of said first end and second end portions.

38. An intravascular flow modifier (IFM) for use in a vessel, the vessel having an interior surface having a defect, the IFM comprising:

at least one outer helical loop formed of a strand, said outer loop being secured in the vessel by at least some portion of said helical loop pressing against a portion of the interior surface of the vessel; and

at least one inner helical loop formed of a strand, at least some portion of said outer helical loop surrounding at least a portion of said inner helical loop so that at least some of said outer helical loop overlaps and contacts at least some of said inner helical loop.

39. The IFM of claim 38, wherein said outer helical loop overlaps and contacts said inner helical loop at a crossing point, at least one crossing point being adjacent the defect in the interior of the vessel.

40. An assembly for an intravascular repair of a defect of a body vessel, the vessel having an interior surface, the assembly comprising:

an elongated first catheter;

an IFM having a deployed configuration when in the vessel at a site of the defect and a pre-deployed configuration for movement through said first catheter;

said IFM including an outer layer formed of a strand, said adjacent helical loops extending between a first end and a second end of said outer layer, once deployed said outer layer being secured in the vessel by at least some of said loops urging against a portion of the interior surface of the vessel, and an inner layer formed of a strand, said strand being configured as a longitudinally oriented coil of adjacent helical loops extending between a first end and a second end of said inner layer, once deployed in the vessel at the site of the defect at least a portion of said outer layer surrounding at least a portion of said inner layer so that at least some of said loops of said outer layer overlap and contact at least some of said loops of said inner layer; and

said first catheter having a proximal end, a distal end, and a central lumen extending axially therethrough, said lumen having a size and shape complementary to the pre-deployed configuration of said IFM such that said IFM is axially slidable therethrough.

41. The assembly of claim 40, further comprising a second catheter having a distal end, a proximal end, and a central lumen extending axially therethrough, said lumen of said second catheter having a size and shape complementary to said first catheter such that said first catheter is axially slidable therein, and such that at least a portion of said distal end of said first catheter can be inserted into said lumen of said second catheter at said proximal end and passes through said lumen of said second catheter and exits said second catheter at said distal end.

42. The assembly of claim 41, further comprising a third catheter having a distal end, a proximal end, and a central lumen extending axially therethrough, said lumen of said third catheter having a size and shape complementary to said second catheter such that said second catheter is axially slidable therein, and such that at least a portion of said distal end of said second catheter can be inserted into said lumen of said third catheter at said proximal end and passes through said lumen of said third catheter and exits said third catheter at said distal end.

43. The assembly of claim 40, wherein the vessel is a cranial vessel, and said IFM has a deployed diameter of between about 1.5 and 12 mm.

44. The assembly of claim 40, wherein said strand of said outer and inner layers has a diameter of no greater than about .020 inches.

45. The assembly of claim 40, wherein said first catheter has an outside diameter of between about .010 and about .014 inches.

46. The assembly of claim 40, wherein said first catheter has an inside diameter of between about .004 and about .006 inches.

47. The assembly of claim 41, wherein said second catheter has an outside diameter of approximately 1 mm.

48. The assembly of claim 41, wherein said second catheter has an inside diameter of at least approximately .022 inches.

49. An assembly for an intravascular repair of a defect of a body vessel, the vessel having an interior surface, the assembly comprising:

an IFM having a deployed configuration when in the vessel at a site of the defect and a pre-deployed configuration for movement through the vessel towards the site of the defect;

said IFM including an outer layer formed of a strand, said strand being configured as a longitudinally oriented coil of adjacent helical loops extending between a first end and a second end of said outer layer, once deployed said outer layer being secured in the vessel by at least some of said loops urging against a portion of the interior surface of the vessel, and an inner layer formed of a strand, said strand being configured as a longitudinally oriented coil of adjacent helical loops extending between a first end and a second end of said inner layer, once deployed in the vessel at the site of the defect at least a portion of said outer layer surrounding at least a portion of said inner layer so that at least some of said loops of said outer layer overlap and contact at least some of said loops of said inner layer; and

a means for moving and maintaining said IFM when in the pre-deployed configuration, the outer and inner layers of said IFM taking the deployed configuration when the moving and maintaining means is no longer applied thereto.

50. The IFM of claim 49, wherein the moving and maintaining means comprises an elongated first catheter having a proximal end, a distal end, and a central lumen extending axially therethrough, said lumen having a size and shape complementary to the respective size and shape of said IFM when in the pre-deployed configuration such that said outer and inner layers are axially slidable therein.

51. The IFM of claim 49, further comprising means for disposing said IFM within the vessel.

52. The IFM of claim 51, wherein the disposing means comprises:

an elongated first catheter having a proximal end, a distal end, and a central lumen extending axially therethrough, said lumen having a size and shape complementary to the respective size and shape of said IFM when in the pre-deployed configuration such that said IFM is axially slidable therein; and

an elongated second catheter having a proximal end, a distal end, and a central lumen extending axially therethrough, said lumen having a size and shape complementary to said first catheter such that said first catheter is axially slidable therein, and such that at least a portion of said distal end of said first catheter can be inserted into said lumen of said second catheter at said proximal end and passes through said lumen of said second catheter and exits said second catheter at said distal end.

53. The IFM of claim 49, and further comprising means for selectively varying the gap between said adjacent helical loops of said outer and inner layers.

54. The IFM of claim 53, wherein said selectively varying means comprises:

an elongated first catheter having a proximal end, a distal end, and a central lumen extending axially therethrough, said lumen having a size and shape complementary to the respective size and shape of said IFM when in the pre-deployed configuration such that said IFM is axially slidable therein;

an elongated second catheter having a proximal end, a distal end, and a central lumen extending axially therethrough, said lumen having a size and shape complementary to said first catheter such that said first catheter is axially slidable therein, and such that at least a portion of said distal end of said first catheter can be inserted into said lumen of said second catheter at said proximal end and passes through said lumen of said second catheter and exits said second catheter at said distal end; and

means for controlling axial movement of said IFM when in the pre-deployed configuration through said first catheter and out of said distal end of said first catheter.

55. The IFM of claim 54, wherein said controlling means includes means for controlling the axial movement of said IFM and said first catheter.

56. An assembly for an intravascular repair of a defect of a cranial vessel, the vessel having an interior surface, the assembly comprising:

an elongated first catheter;

an IFM having a deployed configuration when in the vessel at a site of the defect and a pre-deployed configuration for movement through said first catheter;

said IFM including an outer layer formed of a strand, said strand being configured as a longitudinally oriented coil of adjacent helical loops extending between a first end and a second end of said outer layer, once deployed said outer layer being secured in the vessel by at least some of said loops urging against a portion of said interior surface of the vessel, and an inner layer formed of a strand, said strand being configured as a longitudinally oriented coil of adjacent helical loops extending between a first end and a second end of said inner layer, once deployed in the vessel at the site of the defect at least a portion of said outer layer surrounding at least a portion of said inner layer so that at least some of said loops of said outer layer overlap and contact at least some of said loops of said inner layer, said IFM having a deployed diameter of between about 1.5 and about 12 mm;

said first catheter having a proximal end, a distal end, and a central lumen extending axially therethrough, said lumen having an inside diameter of between about .004 and about .006 inches to receive the pre-deployed configuration of said IFM such that said IFM is axially slidable therethrough; and

a second catheter having a distal end, a proximal end, and a central lumen extending axially therethrough, said lumen of

said second catheter having an inside diameter of at least about .022 inches to receive said first catheter such that said first catheter is axially slidable therein, and such that at least a portion of said distal end of said first catheter can be inserted into said lumen of said second catheter at said proximal end and passes through said lumen of said second catheter and exits said second catheter at said distal end.

57. A method of forming an intravascular flow modifier (IFM) at a pre-selected segment of a vessel, said IFM having a first portion comprising an outer layer of strand and a second portion comprising an inner layer of strand, the vessel having an interior surface, the method comprising the steps of:

moving said IFM through a catheter up to the pre-selected segment of the vessel;

manipulating at least one of said outer layer of strand and said catheter to deploy said outer layer of strand in the pre-selected segment of vessel as a longitudinally oriented coil of adjacent helical loops; and

manipulating at least one of said inner layer of strand and said catheter to deploy said inner layer of strand in the pre-selected segment of vessel as a longitudinally oriented coil of adjacent helical loops within said first portion of said IFM.

58. The method of claim 57, wherein the step of moving includes the step of insulating said IFM within said catheter.

59. The method of claim 57, further comprising the step of inserting said IFM into said catheter prior to the step of moving.

60. The method of claim 59, further comprising the step of elongating said IFM prior to inserting said IFM into said catheter.

61. The method of claim 60, wherein the step of elongating said IFM includes the step of straightening said IFM to a substantially linear configuration.

62. The method of claim 60, wherein said catheter used in the step of moving has a proximal end, a distal end, and a central

lumen extending axially therethrough, said lumen having a size and shape complementary to said IFM when elongated such that said first and second portions of said IFM are axially slidable therethrough.

63. The method of claim 59, wherein said catheter used in the step of inserting includes an elongated micro-catheter having a proximal end, a distal end, and a central lumen extending axially therethrough, said lumen having a size and shape complementary to said IFM when elongated such that said IFM is axially slidable therethrough, and the step of inserting further comprises the step of providing an elongated guide catheter having a distal end, a proximal end, and a central lumen extending axially therethrough, said guide catheter being positioned in the vessel with said distal end of said guide catheter being oriented near the pre-selected segment of the vessel, said lumen of said guide catheter having a size and shape complementary to said micro-catheter such that said micro-catheter is axially slidable therethrough.

64. The method of claim 63, further including the step of inserting at least a portion of said distal end of said micro-catheter into said lumen of said guide catheter at said proximal end and passing through said lumen of said guide catheter and exiting said guide catheter at said distal end prior to the step of moving said IFM.

65. The method of claim 64, wherein the step of inserting further comprises the step of providing an elongated angiographic catheter having a distal end, a proximal end, and a central lumen extending axially therethrough, said angiographic catheter being positioned in the vessel with said distal end of said angiographic catheter being oriented closer to an insertion point into the vessel than said distal end of said guide catheter, said lumen of said angiographic catheter having a size and shape complementary to said guide catheter such that said guide catheter is axially slidable therethrough.

66. The method of claim 65, further including the step of inserting at least a portion of said distal end of said guide catheter into said lumen of said angiographic catheter at said proximal end and passing through said lumen of said angiographic catheter and exiting said angiographic catheter at said distal end prior to the step of moving said IFM.

67. The method of claim 66, further comprising the step of inserting said angiographic catheter into the vessel before inserting said guide catheter containing said micro-catheter into the vessel.

68. The method of claim 67, further comprising the steps of halting the advancement of said angiographic catheter into the vessel and continuing to advance said guide catheter containing said micro-catheter into the vessel.

69. The method of claim 68, further comprising the steps of halting the advancement of said guide catheter into the vessel and continuing to advance said micro-catheter into the vessel.

70. The method of claim 64, wherein the steps of manipulating include the step of selectively varying the spacing between said adjacent helix loops of said outer and inner layers, respectively.

71. The method of claim 60, further comprising the step of expanding said IFM substantially to a pre-elongated diameter during the steps of manipulating.

72. The method of claim 71, wherein the step of expanding said IFM includes the step of warming said strand of said outer layer and said strand of said inner layer.

73. The method of claim 57, wherein the step of manipulating at least one of said outer layer and said catheter includes the step of providing said outer layer with a number of loops where the number is at least two.

74. The method of claim 57, wherein the step of manipulating at least one of said outer layer and said catheter includes the step of providing said outer layer with a single loop.

75. The method of claim 57, wherein the step of manipulating at least one of said inner layer and said catheter includes the step of providing said inner layer with a number of loops where the number is at least two.

76. The method of claim 57, wherein the step of manipulating at least one of said inner layer and said catheter includes the step of providing said inner layer with a single loop.

77. The method of claim 57, wherein the step of manipulating said first portion of said IFM includes the step of feeding said outer layer out of said catheter to produce a first end portion, a middle portion, and a second end portion along said longitudinally oriented coil, said first end, middle, and second end portions each having a pitch, the pitch of said middle portion being smaller than the pitch of said first end and second end portions.

78. The method of claim 77, wherein the step of feeding includes the step of winding the pitch of said first end portion to provide a gap between said loops of between 3 and 7 mm, the pitch of said middle portion to provide a gap between said loops of between 0.5 and 3 mm, and the pitch of said second end portion to provide a gap between said loops of between 3 and 7 mm.

79. The method of claim 57, wherein the step of manipulating said first portion of said IFM includes the step of pushing said first portion out of said catheter and into the pre-selected segment, said catheter having a proximal end and a distal end relative to an insertion point into the vessel.

80. The method of claim 79, wherein the step of pushing includes pushing said first portion out of said distal end of said catheter while pulling said catheter towards the insertion point into the vessel.

81. The method of claim 79, wherein the step of pushing includes pushing said first portion out of said distal end of said catheter at a predetermined rate while pushing said catheter towards the pre-selected segment of the vessel at a rate slower than the predetermined rate of said second portion.

82. The method of claim 57, wherein the step of manipulating said second portion of said IFM includes the step of feeding said inner layer out of said catheter to produce a first end portion, a middle portion, and a second end portion along said longitudinally oriented coil, said first end, middle, and second end portions each having a pitch, the pitch of said middle portion being smaller than the pitch of said first end and second end portions.

83. The method of claim 82, wherein the step of feeding includes the step of winding the pitch of said first end portion to provide a gap between said loops of between 3 and 7 mm, the pitch of said middle portion to provide a gap between said loops of between 0.5 and 3 mm, and the pitch of said second end portion to provide a gap between said loops of between 3 and 7 mm.

84. The method of claim 57, wherein the step of manipulating said second portion of said IFM includes the step of pushing said second portion out of said catheter and into the pre-selected segment, said catheter having a proximal end and a distal end relative to an insertion point into the vessel.

85. The method of claim 84, wherein the step of pushing includes pushing said second portion out of said distal end of said catheter at a predetermined rate while pushing said catheter towards the pre-selected segment of the vessel at a rate slower than the predetermined rate of said second portion.

86. The method of claim 84, wherein the step of pushing includes pushing said second portion out of said distal end of said catheter while pulling said catheter towards the insertion point into the vessel.

87. A method of forming an IFM at a pre-selected segment of a vessel, the vessel having an interior surface, the method comprising the steps of:

straightening said IFM to a substantially linear configuration;

providing an angiographic catheter, a guide catheter, and a micro-catheter, each of said catheters having a distal end, a proximal end, and a central lumen extending axially therethrough;

inserting said angiographic catheter into the vessel;

inserting said micro-catheter into said guide catheter, and said guide catheter into said angiographic catheter;

inserting said IFM into said micro-catheter;

positioning said distal end of said angiographic catheter at a predetermined location in the vessel proximal to the pre-selected segment of the vessel;

advancing at least a portion of said distal end of said guide catheter through said angiographic catheter and exiting said angiographic catheter at said distal end;

positioning said guide catheter in the vessel with the distal end of said guide catheter being oriented between the pre-selected segment of the vessel and said distal end of said angiographic catheter;

advancing at least a portion of said distal end of said micro-catheter through said guide catheter and exiting said guide catheter at said distal end;

moving said IFM through said micro-catheter up to the pre-selected segment of the vessel;

manipulating at least one of said outer layer of strand and said catheter to deploy said outer layer of strand in the pre-selected segment of vessel as a longitudinally oriented coil of adjacent helical loops; and

manipulating at least one of said inner layer of strand and said catheter to deploy said inner layer of strand in the pre-selected segment of vessel as a longitudinally oriented coil of adjacent helical loops within said first portion of said IFM.

88. The method of claim 87, wherein the step of manipulating said first portion of said IFM includes the step of pushing said first portion out of said catheter and into the pre-selected segment, said catheter having a proximal end and a distal end relative to an insertion point into the vessel.

89. The method of claim 88, wherein the step of pushing includes pushing said first portion out of said distal end of said catheter while pulling said catheter towards the insertion point into the vessel.

90. The method of claim 88, wherein the step of pushing includes pushing said first portion out of said distal end of said catheter at a predetermined rate while pushing said catheter towards the pre-selected segment of the vessel at a rate slower than the predetermined rate of said second portion.

91. The method of claim 87, wherein the step of manipulating said second portion of said IFM includes the step of pushing said second portion out of said catheter and into the pre-selected segment, said catheter having a proximal end and a distal end relative to an insertion point into the vessel.

92. The method of claim 91, wherein the step of pushing includes pushing said second portion out of said distal end of said catheter at a predetermined rate while pushing said catheter towards the pre-selected segment of the vessel at a rate slower than the predetermined rate of said second portion.

93. The method of claim 91, wherein the step of pushing includes pushing said second portion out of said distal end of said catheter while pulling said catheter towards the insertion point into the vessel.

94. A method of forming an IFM at a pre-selected segment of a vessel, the vessel having an interior surface, the method comprising the steps of:

- straightening said IFM to a substantially linear configuration;

- providing a guide catheter and a micro-catheter, each of said catheters having a distal end, a proximal end, and a central lumen extending axially therethrough;

- inserting said micro-catheter into said guide catheter;

- inserting said guide catheter into the vessel;

- inserting said IFM into said micro-catheter;

positioning said guide catheter in the vessel with the distal end of said guide catheter being oriented between the pre-selected segment of the vessel and an insertion point into the vessel;

advancing at least a portion of said distal end of said micro-catheter through said guide catheter and exiting said guide catheter at said distal end;

moving said IFM through said micro-catheter up to the pre-selected segment of the vessel; and

manipulating said layer of strand and said catheter to deploy said outer layer of strand in the pre-selected segment of vessel as a longitudinally oriented coil of adjacent helical loops.

95. The method of claim 94, further comprising the steps of halting the advancement of said guide catheter into the vessel and continuing to advance said micro-catheter into the vessel.

96. The method of claim 94, wherein the step of manipulating includes the step of selectively varying the spacing between said adjacent helix loops of said layer.

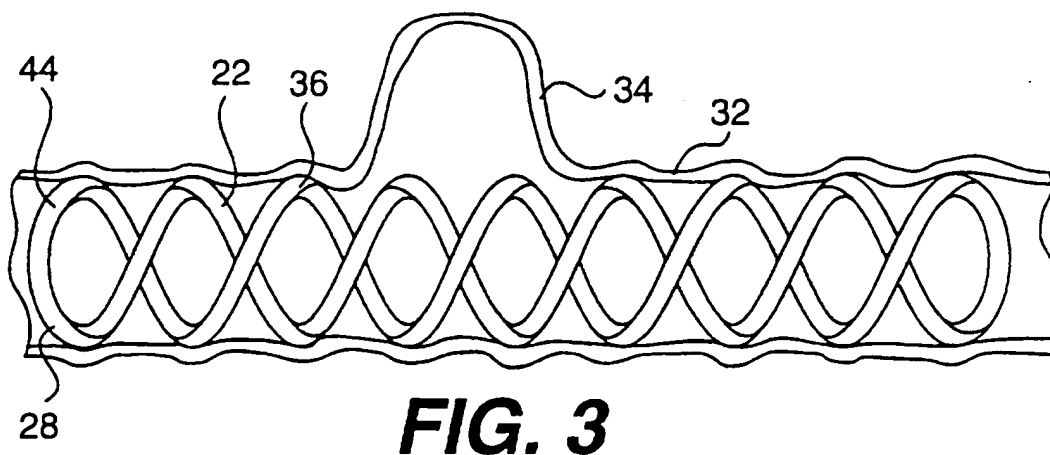
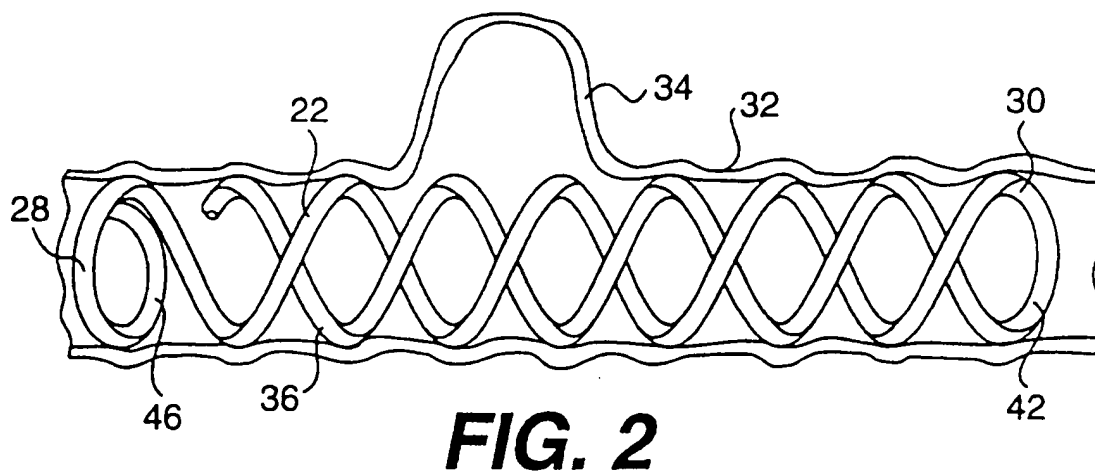
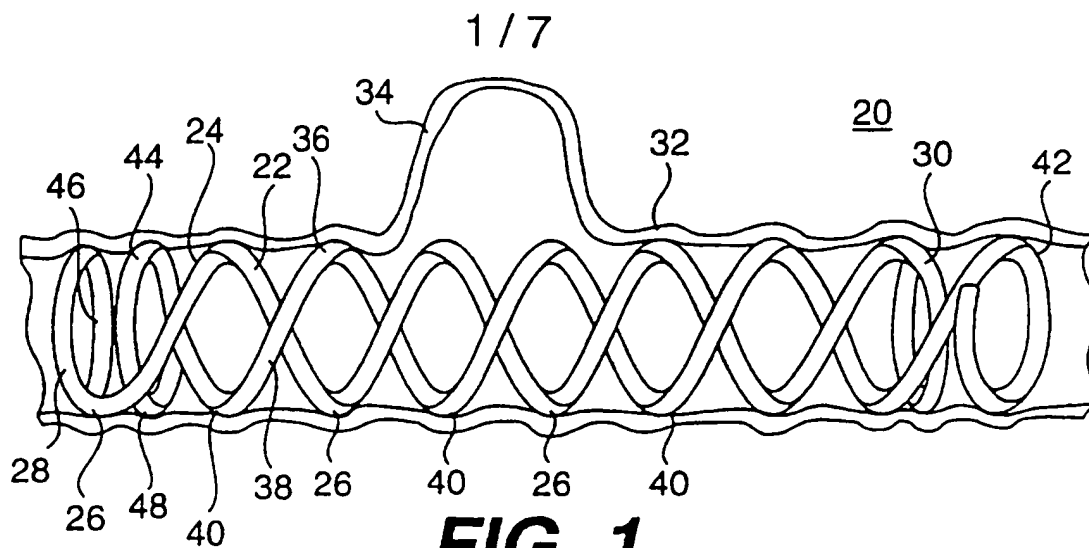
97. The method of claim 94, further comprising the step of expanding said IFM substantially to a pre-elongated diameter during the step of manipulating.

98. The method of claim 94, wherein the step of manipulating includes the step of feeding said layer of strand out of said micro-catheter to produce a first end portion, a middle portion, and a second end portion along said longitudinally oriented coil, said first end, middle, and second end portions each having a pitch, the pitch of said middle portion being smaller than the pitch of said first end and second end portions.

99. The method of claim 94, wherein the step of manipulating includes the step of pushing said layer of strand out of said micro-catheter and into the pre-selected segment, said micro-catheter having a proximal end and a distal end relative to an insertion point into the vessel.

100. The method of claim 99, wherein the step of pushing includes pushing said layer of strand out of said distal end of said micro-catheter at a predetermined rate while pushing said micro-catheter towards the pre-selected segment of the vessel at a rate slower than the predetermined rate of said layer of strand.

101. The method of claim 99, wherein the step of pushing includes pushing said layer of strand out of said distal end of said catheter while pulling said micro-catheter towards the insertion point into the vessel.



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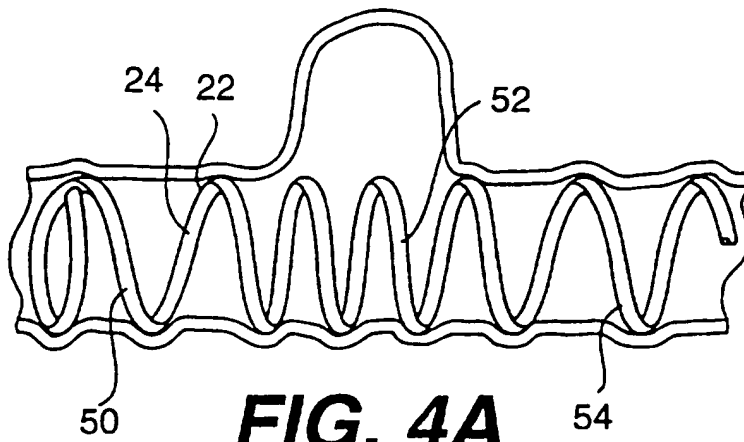


FIG. 4A

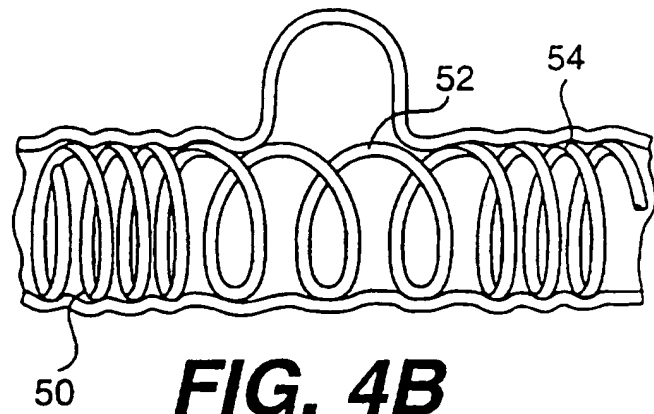


FIG. 4B

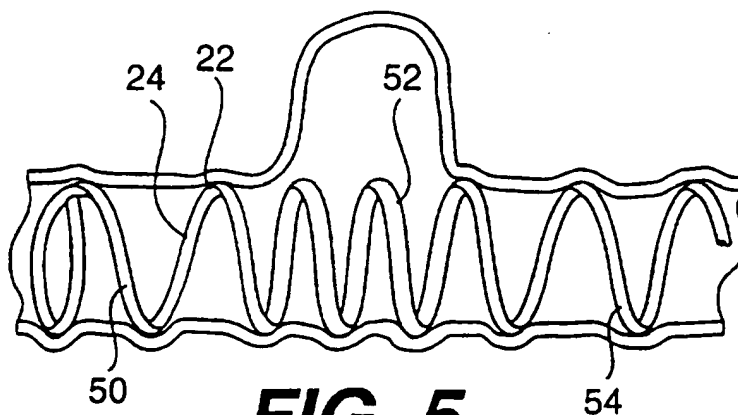
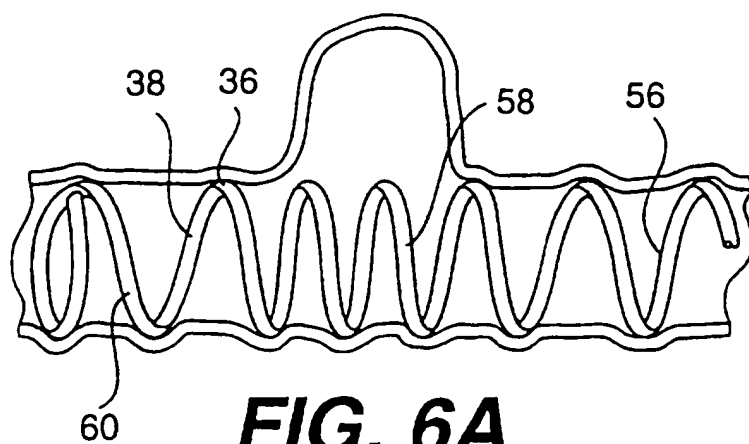
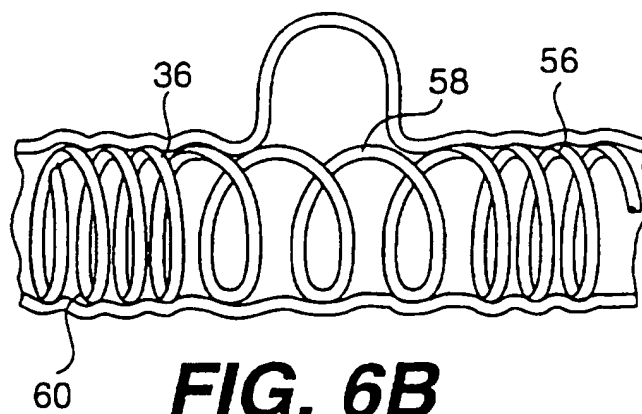
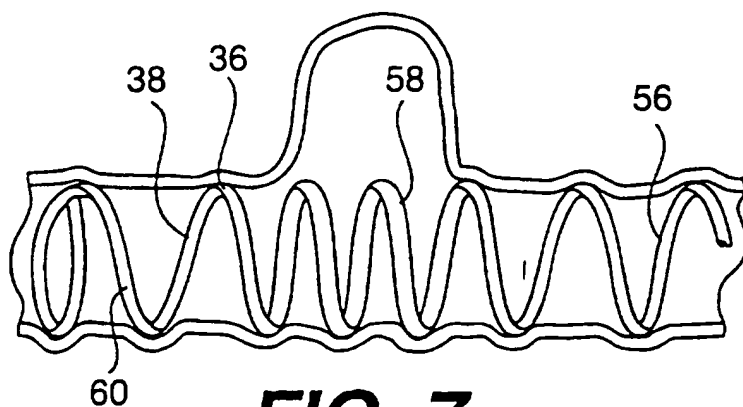


FIG. 5

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**FIG. 6A****FIG. 6B****FIG. 7**

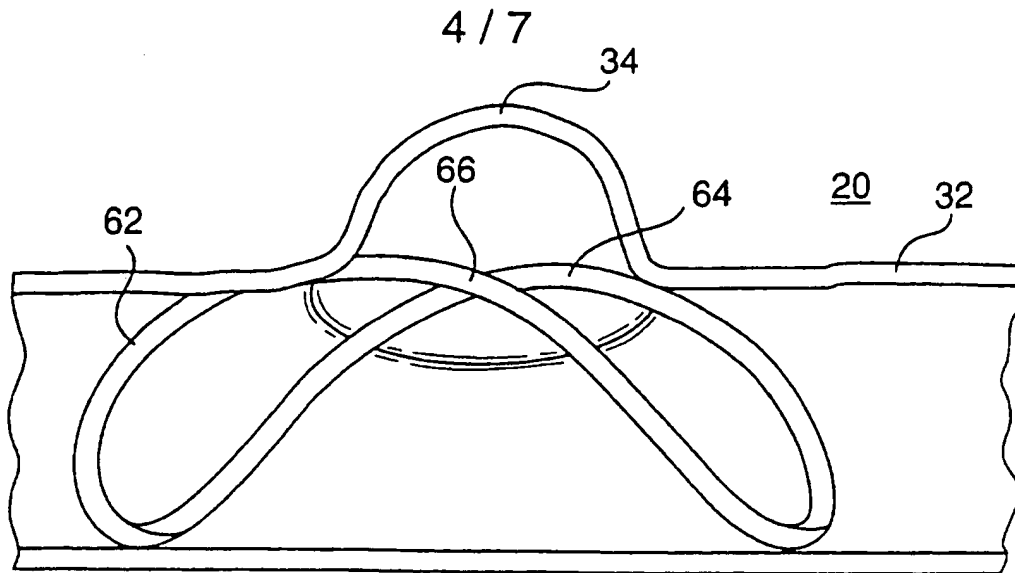


FIG. 8

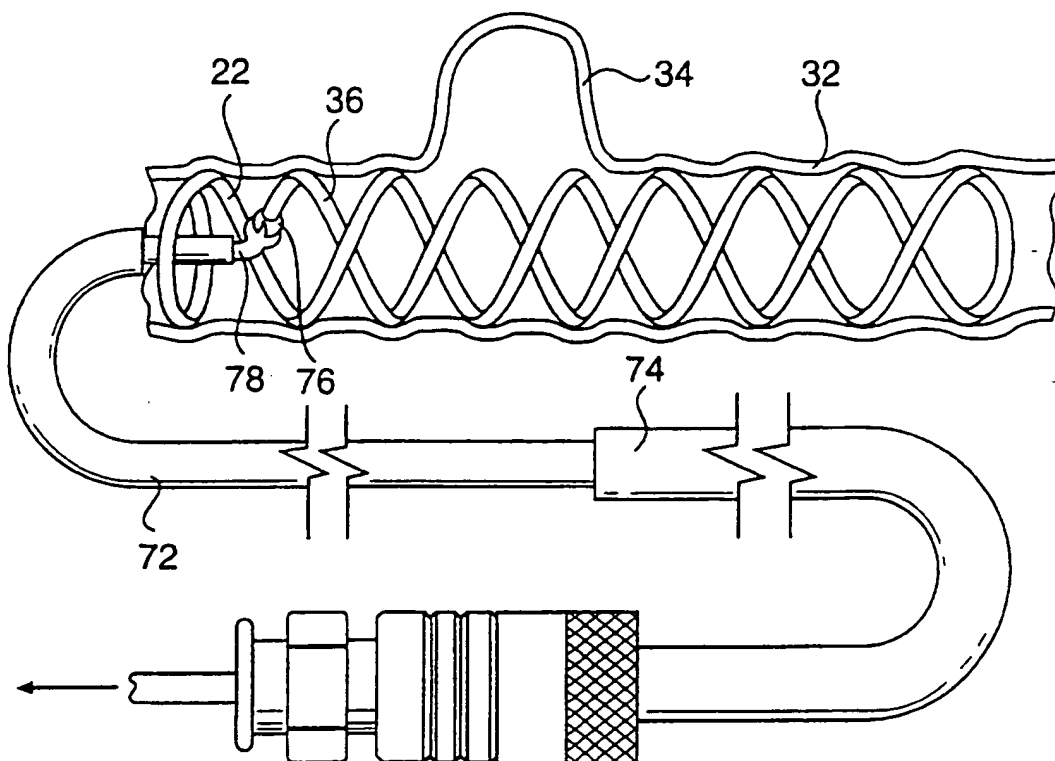
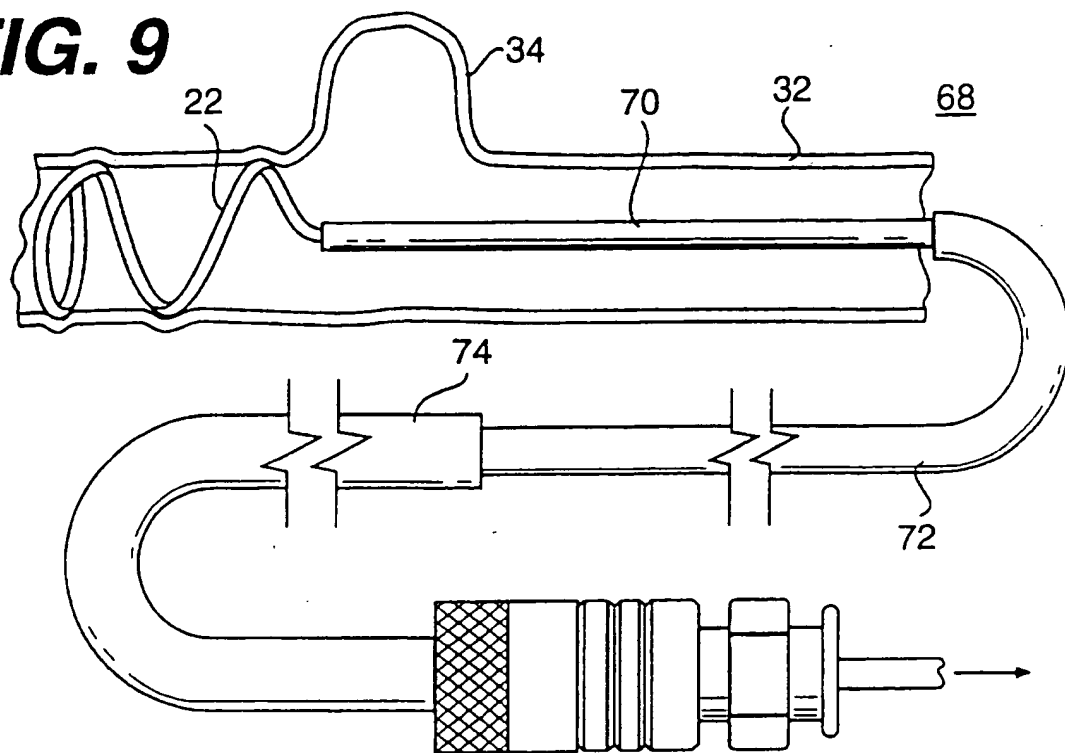
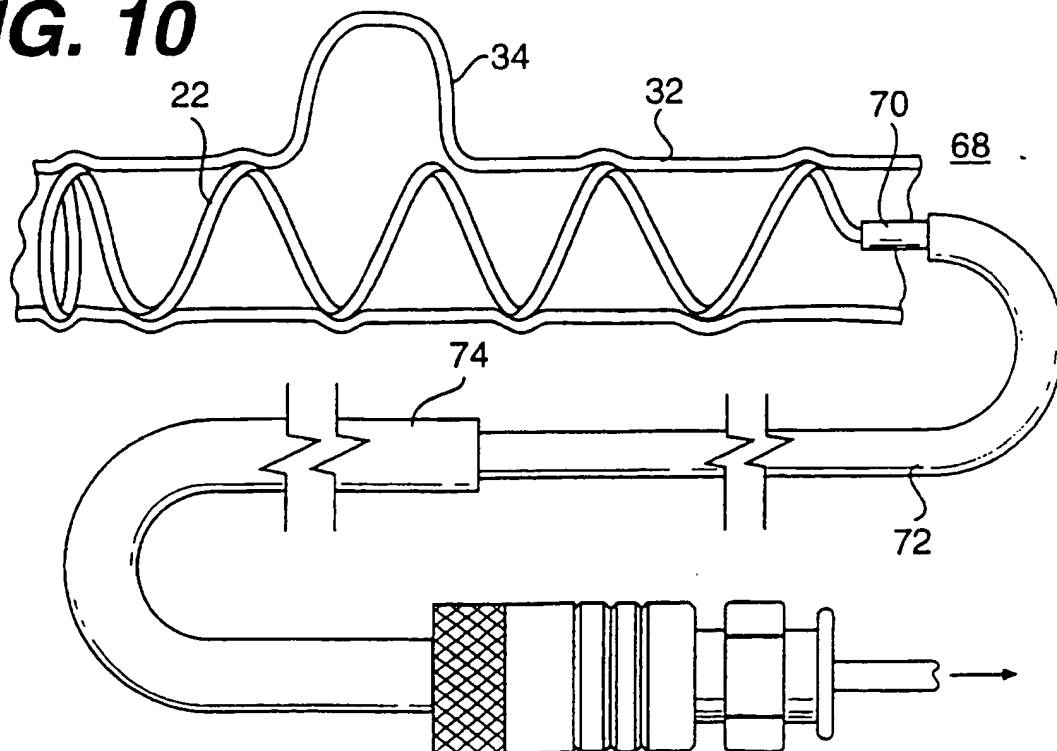
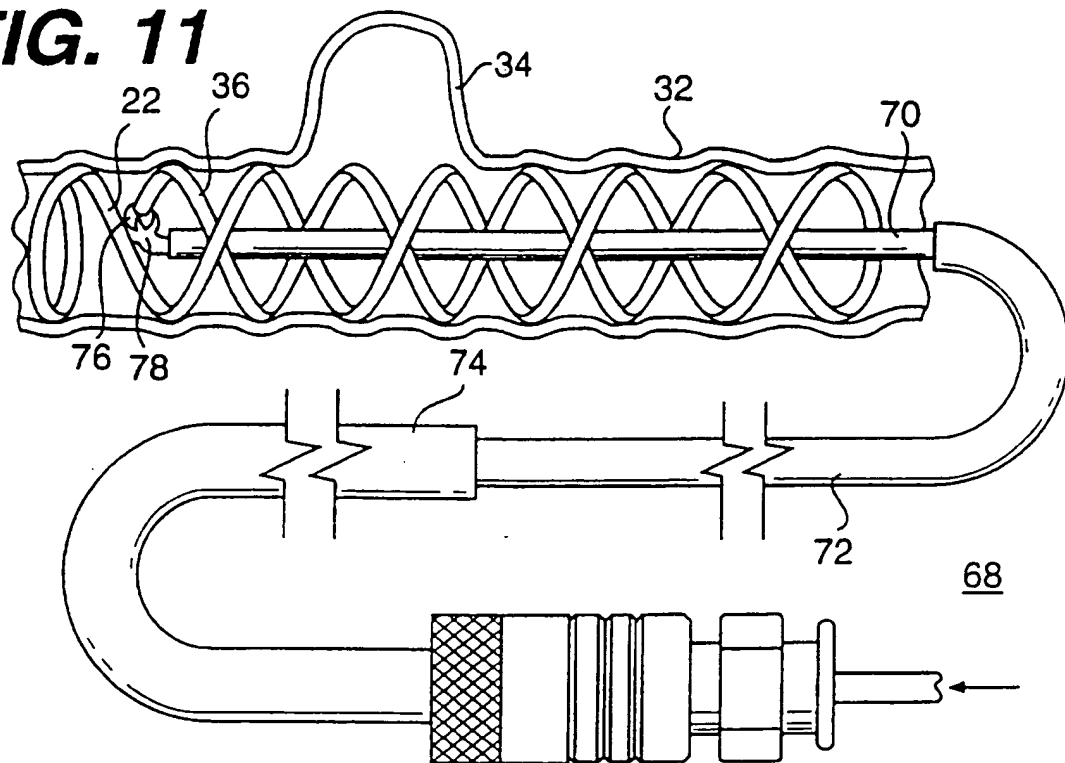
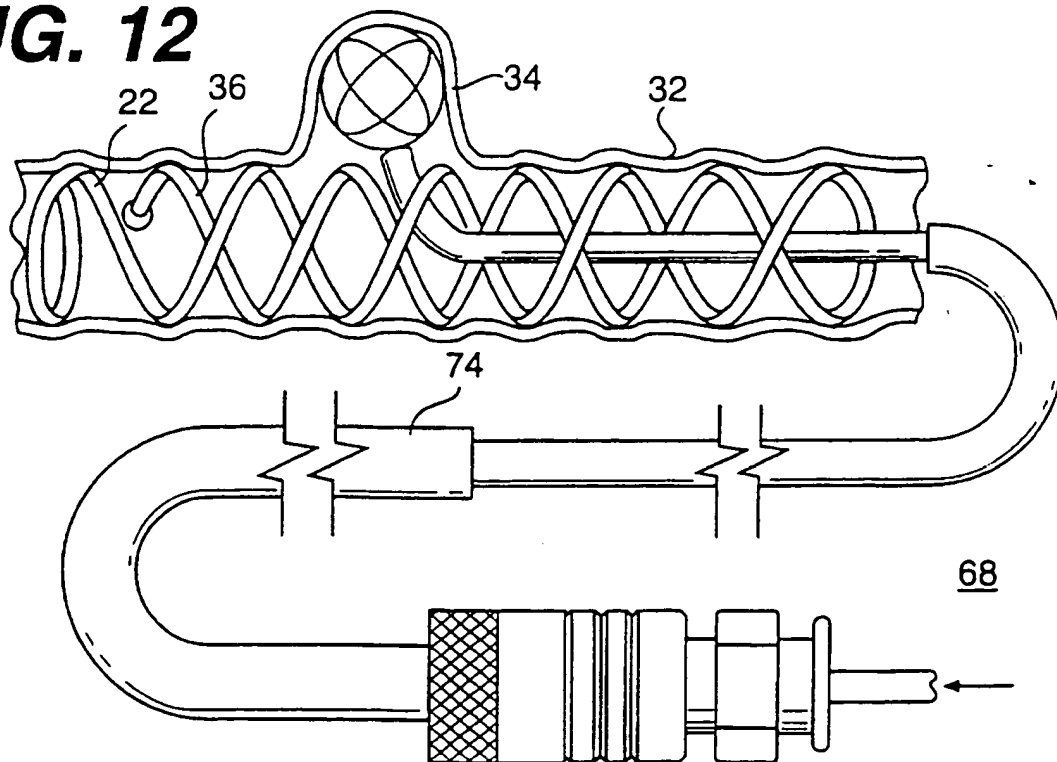


FIG. 15

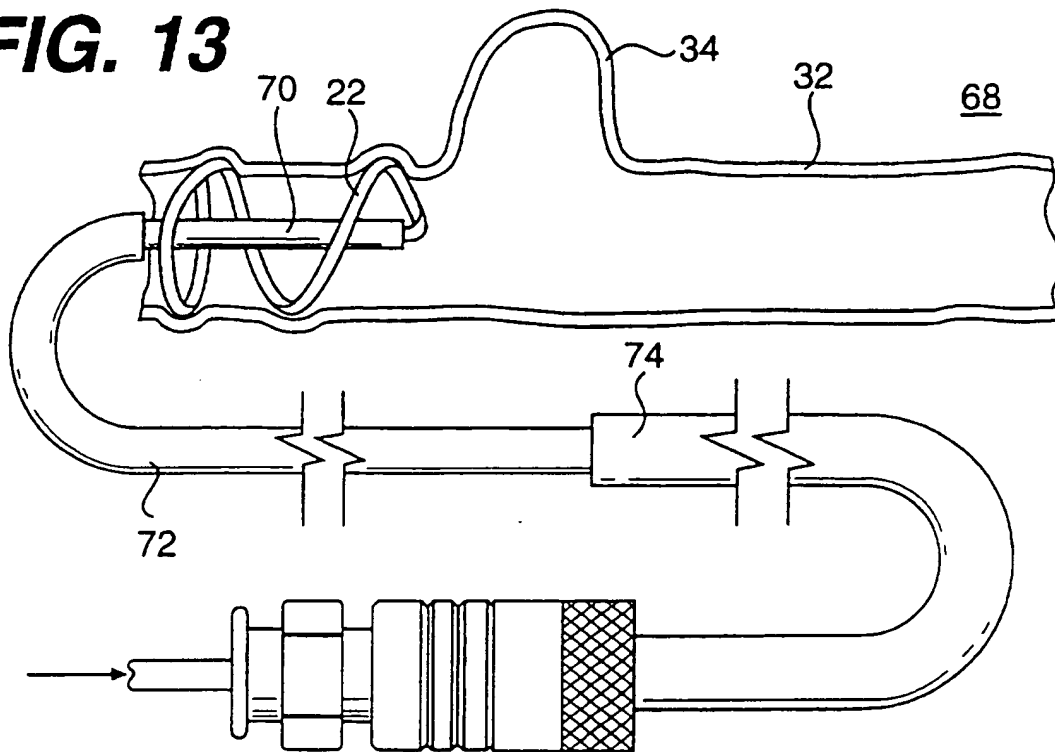
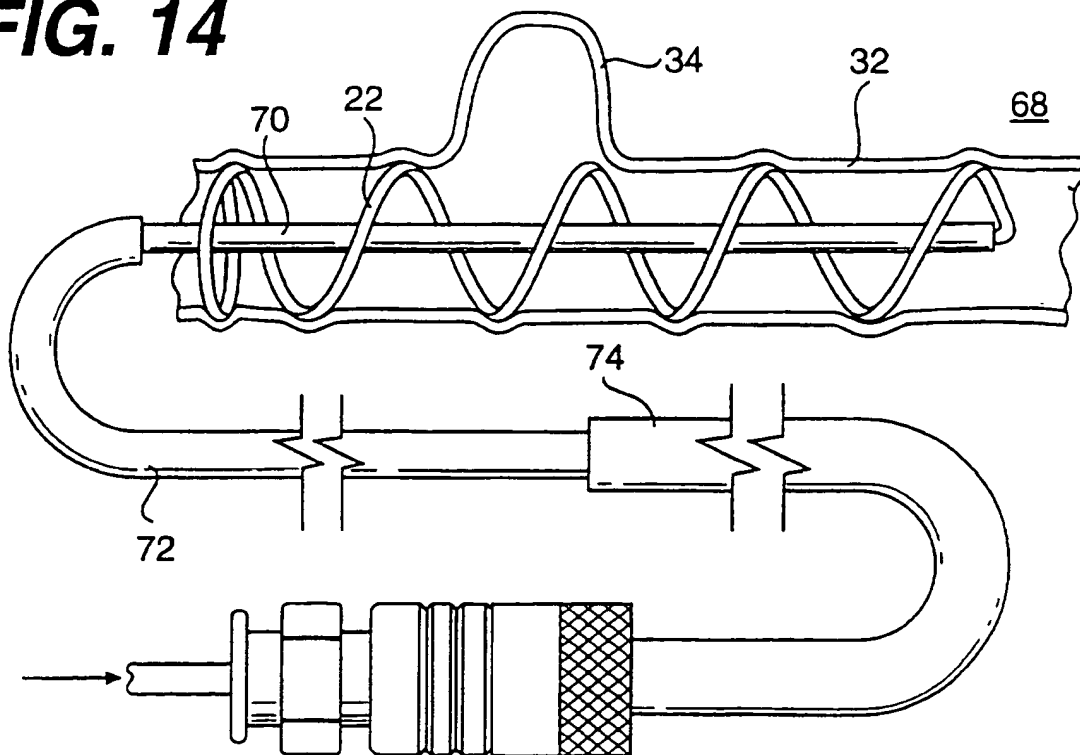
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FIG. 9**FIG. 10**

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FIG. 11**FIG. 12**

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FIG. 13**FIG. 14**

INTERNATIONAL SEARCH REPORT

Intern. Application No
PCT/US 97/10882

A. CLASSIFICATION OF SUBJECT MATTER
IPC 6 A61F2/06 A61F2/01

According to International Patent Classification (IPC) or to both national classification and IPC

B. FIELDS SEARCHED

Minimum documentation searched (classification system followed by classification symbols)
IPC 6 A61F

Documentation searched other than minimum documentation to the extent that such documents are included in the fields searched

Electronic data base consulted during the international search (name of data base and, where practical, search terms used)

C. DOCUMENTS CONSIDERED TO BE RELEVANT

Category *	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No.
X	EP 0 627 201 A (SCHNEIDER EUROP AG) 7 December 1994	1,2,6, 16-19, 38-42, 49,51
A	see the whole document	7,35,36, 50,52,56
X	EP 0 518 704 A (SCIMED LIFE SYSTEMS INC) 16 December 1992	1-3,6, 16-19, 25,32, 34,38, 39,49,51
A	see figures	33,35, 36,40,56
	--- -/-	

☒ Further documents are listed in the continuation of box C.

☒ Patent family members are listed in annex.

* Special categories of cited documents:

- *A* document defining the general state of the art which is not considered to be of particular relevance
- *E* earlier document but published on or after the international filing date
- *L* document which may throw doubts on priority claim(s) or which is cited to establish the publication date of another citation or other special reason (as specified)
- *O* document referring to an oral disclosure, use, exhibition or other means
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- *T* later document published after the international filing date or priority date and not in conflict with the application but cited to understand the principle or theory underlying the invention
- *X* document of particular relevance; the claimed invention cannot be considered novel or cannot be considered to involve an inventive step when the document is taken alone
- *Y* document of particular relevance; the claimed invention cannot be considered to involve an inventive step when the document is combined with one or more other such documents, such combination being obvious to a person skilled in the art
- *&* document member of the same patent family

Date of the actual completion of the international search

19 September 1997

Date of mailing of the international search report

06. 11. 97

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Authorized officer

Neumann, E

INTERNATIONAL SEARCH REPORT

International Application No

PCT/US 97/10882

C.(Continuation) DOCUMENTS CONSIDERED TO BE RELEVANT

Category	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No.
X	WO 95 18585 A (MICROFIL IND S A ;BLANC LOUIS (CH)) 13 July 1995	1,2,6-9, 17-20, 26,31, 34,38,39
A	see abstract; claims; figures see page 10, line 17 - line 29	35-37, 49,51
X	US 5 015 253 A (MACGREGOR DAVID C) 14 May 1991	1-3,6, 17-19, 25,32, 34,38, 39,49
A	see column 1, line 10 - line 15; figures see column 2, line 51 - column 4, line 19	33,35, 36,40

INTERNATIONAL SEARCH REPORT

International application No.
PCT/US 97/10882

Box I Observations where certain claims were found unsearchable (Continuation of item 1 of first sheet)

This International Search Report has not been established in respect of certain claims under Article 17(2)(a) for the following reasons:

1. ☒ Claims Nos.: 57-101
because they relate to subject matter not required to be searched by this Authority, namely:
Rule 39.1(iv) PCT - Method for treatment of the human or animal body by surgery
2. ☐ Claims Nos.:
because they relate to parts of the International Application that do not comply with the prescribed requirements to such an extent that no meaningful International Search can be carried out, specifically:
3. ☐ Claims Nos.:
because they are dependent claims and are not drafted in accordance with the second and third sentences of Rule 6.4(a).

Box II Observations where unity of invention is lacking (Continuation of item 2 of first sheet)

This International Searching Authority found multiple inventions in this international application, as follows:

1. ☐ As all required additional search fees were timely paid by the applicant, this International Search Report covers all searchable claims.
2. ☐ As all searchable claims could be searched without effort justifying an additional fee, this Authority did not invite payment of any additional fee.
3. ☐ As only some of the required additional search fees were timely paid by the applicant, this International Search Report covers only those claims for which fees were paid, specifically claims Nos.:
4. ☐ No required additional search fees were timely paid by the applicant. Consequently, this International Search Report is restricted to the invention first mentioned in the claims; it is covered by claims Nos.:

Remark on Protest

- ☐ The additional search fees were accompanied by the applicant's protest.
- ☐ No protest accompanied the payment of additional search fees.

INTERNATIONAL SEARCH REPORT

information on patent family members

Intern. Application No

PCT/US 97/10882

Patent document cited in search report	Publication date	Patent family member(s)	Publication date
EP 0627201 A	07-12-94	AU 659975 B AU 6343794 A JP 7051384 A	01-06-95 15-12-94 28-02-95
EP 0518704 A	16-12-92	US 5449372 A CA 2068582 A JP 5200048 A	12-09-95 15-12-92 10-08-93
WO 9518585 A	13-07-95	FR 2714815 A EP 0688197 A	13-07-95 27-12-95
US 5015253 A	14-05-91	US 5171262 A	15-12-92